Walden University

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Christiana I. Chineme

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Abstract

Beyond Borders: Nigerian Diaspora, Men's Experiences of Intimate Partner Violence

by

Christiana I. Chineme

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Health Services

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Abstract

Culture and social structures are factors in the way people view or think of intimate partner violence (IPV). A significant gap exists in the current literature regarding whether changes exist in IPV experience because of continuous and direct contact between individuals from different cultural origins. Despite the increasing emphasis on the social and structural determinants of IPV-related behaviors, research and interventions lag on how people view IPV while they live in their native country and when they migrate and are exposed to a different culture and social structure. The purpose of this qualitative phenomenological research was to explore the IPV experiences of 12 Nigerian men living in New York City since migrating from Nigeria to the United States. Berger and Lukemann's social construct of reality theory and the Lévi-Strauss culture theory of knowledge were used. The purpose was to understand the changes in Nigerian men's experience of IPV from when they lived in Nigeria to live in the United States. The data collection was through semi structured interviews of 12 Nigerian men ages 30 to 60 years who lived in the United States and became acculturated to society. The data analysis method was hand coding in which I looked for the similarities and differences in viewpoints on IPV since emigrating to the United States. The study's themes included emotional aberration, secondhand trauma, machismo and acculturation and the understanding of IPV. The results significantly contribute to the existing literature and could enhance social change initiatives by tailoring better IPV support interventions that can positively affect health outcomes of Nigerians living in New York City.

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Dedication

To my late mother and brothers and sisters and with their support, and with their

permission, I dedicate this project to Dr. Aagard, who relentlessly and with unequivocal

commitment ensured that this doctoral work got completed successfully. I want to thank

God for giving me life, wisdom, and strength to embark upon and finish this doctoral

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dissertation to successful completion. Those would include but are not limited to family

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Chapter 1: Introduction to the Study

Understanding intimate partner violence (IPV) affects how people respond to IPV related issues including the consequences on individual health and the health of the community (Kastanakis & Voyer, 2014). People respond to IPV based on their cultural beliefs about women's roles in intimate relationships. Despite political and social changes in many parts of the world over the past few decades, not much has changed on this front (Alves et al., 2016). In recognition of the spread and seriousness of IPV, and to foster healthy people, as well as healthier communities, some governments have instituted mechanisms, including public health policies and public education, to create awareness and curb behaviors that lead to IPV (The Community Tool Box, 2017). Having laws and policies that create awareness about, or curb behavior against, IPV helps prevent IPV instead of only holding perpetrators accountable after the fact. That could prove challenging to someone or people from a place with no laws or policies against IPV. Igwe (2015) noted that nongovernment organizations (NGOs) and citizens could play an even more significant role in changing the course of IPV positively because everyone is responsible for ensuring that people overcome cultural and traditional beliefs and practices that inhibit the understanding of the consequences of IPV on communities.

Walton-Roberts (2015) noted that the recent increase in socialization through technology, globalization and migration of people to different parts of the world driven by various circumstances, including political conflicts, and economic disparities, has brought about an exponential increase in the exchange of cultural practices and beliefs, including disturbing behaviors of IPV. Walton-Roberts added that immigrants to the host

countries, such as Nigerians in the United States, bring their cultural beliefs including beliefs about IPV. Globalization, though a formidable phenomenon in bringing people together, does not completely change peoples' cultural views while they are abroad (Walton-Roberts, 2015). Instead, emigrants create a challenge to cross cultural thinkers where ordinarily migrating to a new community should mean a new way of life (Walton-Roberts, 2015). The implication of Walton-Robert's assertions is that despite cultural differences on the role of women and the heightened protection for IPV victims in the United States, some immigrants may hold onto their existing beliefs, without regard for the new system.

Akinslure-Smith, Chu, Keatley, and Rasmussen (2013) agreed with the discovery that West African migrants in New York handled IPV related cases as they did in Africa. Akinsure-Smith et al. found that West-African immigrants in New York, especially women, still employed their native cultural norms in handling IPV victimization. That often involves seeking counsel from family members, elders, or friends of their perpetrating partners, who, owing to their societal role, may not adequately settle such disputes (Akinsure-Smith et al., 2013). Consequently, understanding the perspectives about IPV among an immigrant community such as Nigerians in New York City could improve IPV prevention efforts among this group (Mose & Gillum, 2016). The purpose of this study was to understand if the experiences of IPV of Nigerian men living in New York City changed from when they lived in Nigeria. I also examined the significance of that change after acculturation into society.

In 1993, the United Nations General Assembly adopted a resolution on the Elimination of Violence Against Women in recognition of equality, liberty, security, integrity, and dignity of women as human rights (United Nations [U.N.], 2010). Since then, multiple nations have adopted or enhanced the legislation that addresses violence against women, their equality, liberty, security, integrity, and dignity as human rights (U.N., 2010). The legislation is not only about having laws that criminalize violence against women and prosecute or punish perpetrators, the focus has also been to empower and support victims, as well as change people's attitude towards IPV while strengthening prevention measures against IPV (U.N., 2010). The legislation also provides a legal framework and foundation for a holistic and efficient response to IPV (U.N., 2010). According to Hanna (2014), the United States adopted the Violence Against Women Act (VAWA) in 1994, whereas Madu (2015) noted that Nigeria still does not have a national domestic violence policy, although some states in the country do. As of 2017, it cannot be verified that Nigeria has national legislation against IPV. Madu argued that the nonexistence of a national law on violence against women is one of the bases for the systemic and cultural barrier to the prevention of IPV in Nigeria. That may continue to affect some Nigerian men and women who migrate to the United States or other nations with active laws against IPV.

Chapter 1 includes the problem statement, in which I discuss the reason behind this research. I also covered the purpose of the research, significance of the research, and background in this chapter. I also discussed, along with the research questions,

assumptions, limitations, definitions, scope, delimitations, issues of and trustworthiness. I then summarize the chapter at the end.

Background

IPV is a major social and public health problem worldwide and needs attention paid to it both locally and globally (World Health Organization [W.H.O], 2017). W.H.O. (2017) and the London School of Hygiene and Tropical Medicine, in partnership with the Medical Research Council (2013), found that approximately 30% of women who have been in a relationship have experienced physical and/or sexual violence by their intimate partner. According to researchers, environmental, cultural values, and norms play a significant role in the perception, tolerance, and continuation of IPV among various societies (W.H.O., 2017). Many studies have shown that IPV has lasting effects on the victims and children (Modi, Palmer, & Armstrong, 2014). Besides prioritization of and resource allocation for efforts on prevention of IPV, in 1992, the United Nations Assembly committee on the Declaration on the Elimination of Violence Against Women added punishment and provided compensation to victims of IPV as strategies to the campaign to increase awareness of violence against women as a societal problem (W.H.O, 2017).

The U. N. developed legal and policy directives to assist states with changing rules of behavior or value systems and give clarity on IPV (Modi et al., 2014). In 1994, the United States introduced VAWA, whereas, according to Madu (2015), Nigeria has no national domestic violence policy yet. The Violence Against Persons Bill passed the Nigeria House of Assembly in 2013, but the Senate has yet to approve it (Madu, 2015).

Makama (2013) implied that the male dominance of the structure of social organization and institution at all levels of leadership in Nigeria makes it difficult to address the issues and rights of women in Nigerian society. The fact that there are no nationally instituted laws against IPV in Nigeria might indicate a national tolerance for the practice because this is socially and culturally present among Nigerian communities. Madu (2015) argued further that the Nigerian Diaspora might have difficulty modifying their behaviors, considering the intimation by Johnsdotter & Essén (2015), that immigration, acculturation, and public policy are linked to culture change.

Problem Statement

IPV is a public health issue that cuts across nation and culture, race, ethnicity, social class, sexual and gender identity, religion, age groups, and the environment (W.H.O., n. d.). W.H.O (n. d.) defined *IPV* as a pattern of abusive behavior one partner uses to gain or maintain power and control over the other. IPV affects men, women, boys, and girls. The difference is that some countries such as the United States have laws against violence against women, whereas some countries, such as Nigeria, do not. Citing its 2003 study, the 2014 Center for Disease Control (CDC) Annual Notice reported an average of 24 people per minute as victims of rape, physical violence, or stalking by an intimate partner in the United States. (CDC, 2014). That is more than 12 million women and men in a year (CDC, 2014). The notice further reported that nearly three in 10 women, and one in 10 men in the United States, have experienced rape, physical violence, and stalking by a partner that had related consequences on their functioning (CDC, 2014). In 2007, IPV accounted for 2,340 deaths, or 14% of all homicides in the

United States. Of these deaths, 70% were female, and 30% were male (C.D.C., 2014). The record also showed that in 1995, the United States spent an estimated 5.8 billion dollars in IPV related care (medical, mental health services, and lost productivity such as time away from work) (CDC, 2014). When updated in 2003, that amount increased to more than 8.3 billion dollars (CDC, 2014).

In New York State, the National Coalition Against Domestic Violence (NCADV) reported that in 2013, the law enforcement responded to 284,660 domestic violence incidents in New York City and 187,710 outside the New York City (a 5% decrease from 2012). The report also said that despite a 6.5% decrease in the number of homicides in New York State between 2012 and 2013, there was a 16% increase in the number of domestic violence homicides within the same period.

In Nigeria, the 2013 National Demographic Health Survey (NDHS) reported that 28% of married Nigerian women from the age of 15 years were experiencing physical violence in the hands of a man compared with 2% of Nigerian men who suffered physical abuse in the hands of their spouse (pp. 304 & 322). Significantly, it was the women who answered that they initiated the violence (NDHS, 2013).

Adogu, Chimah, Ubajaka, Ilikaand, and Egenti (2015) argued that culture in the three religions in Nigeria contributed to the abuse of women and girls by men and boys more often than from women and girls against men and young men. Igwe (2015) added that the systemic marginalization of women in Nigeria instills into boys and young men the idea that violence and dominance over women is a part of masculinity, which is another factor influencing attitudes concerning IPV among Nigerian men. Nwabunike

and Tenkorang (2015) suggested that gender roles in Nigerian society create inequality between men and women which has, in turn, led to the public justification of IPV, particularly against women. Because there is no prohibition to such a mindset, it becomes pervasive in Nigerian culture (Madu, 2015). Dim and Ogunye (2017) disagreed that gender and socioeconomic factors were associated with IPV in Bariga, Local Community Development Area, Lagos State, Nigeria, as much as educational differences between spouses. Nevertheless, the negative behavior toward IPV within Nigerian society has been normalized from generation to generation and gone without challenge (Igwe, 2015). Understanding whether this type of behavior toward IPV persists among Nigerian men living in New York City provided information that might be beneficial for creating holistic interventions for the community.

There is a male to female IPV and a female to male IPV. The focus of this research was on male to female IPV. The literature that I reviewed showed that significant numbers often are victims of male perpetrated abuse (Adebayo, 2014; Hamberger & Larsen, 2015). Hamberger and Larsen's (2015) review of articles with clinical samples published between 2002 and 2013 on both sexes' experience of IPV found prevalence rates of women on men physical abuse are, to some degree, high in severity. Hamberger and Larsen's (2015) reviewed articles with clinical samples published between 2002 and 2013 on both sexes' experience of IPV and found prevalence rates of women on men's physical abuse are, to some degree, high in severity. The data, however, revealed that women's physical violence against men appeared to be more in response to violence initiated against them (Hamberger & Larsen, 2015). The

authors pointed to Fanslow, Gulliver, Dixon, and Ayallo (2015) as an example (Hamberger & Larsen, 2015). Fanslow et al. (2015) indicated that 64% of the female to male IPV were women who fought back at least once or twice against their partners when they were being physically abused. Hamberger and Larsen (2015) further argued that men are victims of abuse perpetrated by women, but the extent and consequences of female to male violence are poorly understood as the issue is underexplored. Hamberger and Larsen (2015) further indicated that research and policy on female victims of IPV had been the focus because the understanding of the phenomena has commonly been from the perspective of male to female violence.

IPV is prevalent across cultures and it can mask in some cases as acceptance of women's equality, or what Glick, Wilkerson, and Cuffe (2015), described as *ambivalent sexism*. According to Glick et al. (2015), ambivalent sexism is when men have both an animus and cordial relationship with women who they view as controlling men with their viewpoints on women's rights. Although many factors influence perpetration of IPV, the most recognized significant drivers include culture, social norms, and attitudes.

Abramsky et al. (2016) found that altering the community norm of traditional patriarchal power structures (social acceptance of gender inequality) reduced IPV among the Rubaga and Makindye Divisions of Kampala, Uganda. The authors indicated that promoting critical analysis and discussing the consequences of authority and power inequalities between men and women to the cultural leaders of those divisions, including how to use power positively to create and sustain change both on individual and community levels, helped produce the behavior change toward IPV (Abramsky et al.,

2016). Fuchsel, Murphy, and Dufresne (2012) disagreed that alteration in cultural and social norms through migration had influence on the perception of IPV among migrant Mexican women in the United States. Notwithstanding, among several other causative factors, culture has been linked to IPV (Donohoe, 2014).

The W.H.O. (n.d.) associated IPV with acts that involve physical injury, sexual assault, psychological and emotional abuse, social isolation, stalking, economic deprivation, intimidation, and threats. Regardless of the type, IPV is a serious health problem in every country in the world, including the United States. (W.H.O., n. d.). The difference is that some countries, such as the United States, have laws prohibiting violence against women, whereas other countries, such as Nigeria, do not have such laws.

Decades of research have shown mixed success of intervention programs for batterers and has presented that it is better to prevent IPV than to manage the ramifications (Jewkes, Flood, & Lang, 2015). In 1993, the United Nations General Assembly added to IPV prevention, including government involvement and policy intervention as another strategy to alter the mechanisms within the social structure, usually characterized by changes in cultural symbols, rules of behavior, social organizations, or value systems (Hanna, 2014; Modi et al., 2014; U.N., 2010). However, government involvement and policy intervention against IPV is not new. In 1979, the United Nations General Assembly adopted an international treaty described as an international bill of rights for women (The Convention on the Elimination of all Forms of Discrimination Against Women, [CEDAW]) (Madu, 2015). By September 1981, the bill had been ratified by 189 countries, including the United States and Nigeria (Madu,2015).

The literature that I reviewed agreed that the influence of the process of acculturation (the extent to which a migrant adopts the values and attitudes of a new culture) is essential in understanding IPV (Johnsdotter and Essén, 2015 & Kim & Sung, 2015). Some researchers, such as Edelstein (2013) and Kim and Sung (2015) cited acculturation stress as one of the several common risk factors for IPV among immigrants such as Nigerian men living in New York City. Edelstein and Kim and Sung gave several explanations for that. One of the reasons is the suggestion that immigrants may be at risk for IPV due to substantial changes to a family system upon migration (i.e., shifting gender roles) and increased structural vulnerabilities encountered in a new culture (Edelstein, 2013; Kim & Sung, 2015). These adjustments may lead to higher economic insecurities and acculturation stress that may, in turn, increase risk for IPV (Kimber et al. 2015). Additionally, the enforcement of laws against IPV in the United States (i.e., getting a perpetrator arrested) poses an increased risk for migrant families.

Conversely, some researchers found a link between the level of acculturation and empowerment of immigrants to report abuse or history of violence than they would in their country of origin (Johnsdotter and Essén, 2015; Mose & Gillum, 2015). Although some researchers discovered that greater acculturation influenced the odds of IPV perpetration or being the victim of IPV, there is evidence to the contrary (Kim & Sung, 2015; Pierotti, 2013). The prevailing concept among the researchers, however, is the suggestion that it is not necessarily the process of acculturation that influences risk for IPV perpetration among immigrants but, instead, the distress accompanying acculturating while simultaneously trying to retain ties to the culture of origin (Rudnev, 2014; Sabina,

Cuevas, & Schally, 2013). That stress from acculturation may increase the risk of using violence as a response to interpersonal conflict (Kim & Sung, 2015; Ramos, 2013).

Twenge, Sherman, and Wells (2015) reported that Americans have, through the years, become more accepting of nonmarital sex except extramarital sex, which may have implications for Nigerian men living in New York City. The 2013 Nigeria Demographic and Health Survey and Igwe (2015) revealed that some Nigerian men do not view marital rape as IPV. But Twenge et al. (2015) argued that as social problems, sexual behavior and attitude are critical in preventing sexual abuse and assault.

Acculturative stress is one of the causes of IPV among immigrants; men are most likely to act out aggressively towards their intimate partners when the women are legally or economically dependent on them (Kim, & Sung, 2015). The risk of violence increases for immigrant women when the men experience or perceive the loss of power over the women, mainly through financial independence (Kim & Sung, 2015). Kalunta-Crompton (2013) agreed that financial independence of the women and a flexible division of gender roles in the United States are some of the causes of IPV among Nigerian community in the United States. That is why I explored the IPV experience of 12 Nigerian men living in New York City relative to their transition to United States culture that grants women financial independence.

Purpose of the Study

I used a qualitative phenomenological research approach to explore the understanding of IPV among 12 Nigerian men living in New York City when they lived in Nigeria, and now that they lived in the United States. The data analysis explored the

influence of acculturation on the experience of IPV by Nigerian men living in New York

City. This research is vital because of the implications of the emerging themes for IPV

prevention, particularly within the Nigerian community in New York City.

Theoretical and Conceptual Framework

I conducted this research using Berger and Luckmann's (1966) social construct of

reality theory and the Lévi-Strauss culture theory of knowledge (1958). Berger and

Luckmann (1966) suggested that society influences human behavior. Lévi-Strauss's

culture theory (1958) implied that stresses from culture affect human cognition that create

some forms of knowledge. Both arguments mean that socialization and acculturation

could shape a person's mind and behavior toward acceptable ways of thinking, speaking,

and acting in that society (Pierotti, 2013). Put differently, cultural factors, such as the

degree of acculturation, could substantially influence how people respond to a

phenomenon such as IPV. Levels of acculturation exist because acculturation itself is a

process that brings about change with time as people interact with the foreign cultures

(Berry, 1997).

Berger and Lukemann's (1966) social construct of reality theory and the Lévi-

Strauss (1958) culture theory of knowledge were appropriate for this research because

researchers have found a strong association between the underlying risk factors of IPV

and social determinants such as cultural, social, and gender norms; unemployment and

income inequality, social change, and limited educational opportunities; weak

governance; and the poor rule of law (Onigbogi, Odeyemi, & Onigbogi, 2015). In some

of the literature I reviewed, I found that some of the world governments are now using

policy on violence against women to establish norms of acceptable and unacceptable behavior between men and women and boys and girls. When the U.N. advocated governments' use of violence against women policy as a strategy to curb IPV, one of the intents was to raise awareness among people to reject IPV (Pierotti, 2013). However, Pierotti (2013) found that global diffusion of culture has also contributed to the rejection of IPV.

Conversely, Lansford, Deater-Deckard, Bornstein, Putnick, and Bradley (2014) and Linos, Subramanian, Berkman, and Kawachi (2013) disagreed by arguing that exposure to a culture of violence against women in places such as Nigeria, and conditions determinant of social norms about gender roles, family structure, marriage patterns, and the productive role of women, can persist even when conditions change. To understand the extent to which culture change and social norms influence IPV, learning the experience of people who immigrated from nations, such as Nigeria, without a national law against IPV to a nation with one, such as the United States, is particularly significant.

Nature of the Study

This was a qualitative phenomenological research in which I explored how 12 Nigerian men living in New York City who acculturated to United States life perceived IPV perpetration in Nigeria and in the United States. The research was designed to catalog the evolution of their experiences regarding IPV and the consequences associated with its perpetration before and since they have been living in the United States. Data collection was through a semi structured face to face interview of the 12 Nigerian men who have lived in the United States long enough to have acculturated. Qualitative

phenomenological research design is consistent with the tradition of understanding meaning, structure, and people's perceptions or reality of a phenomenon for a person or group of individuals (Creswell, 2013). Researchers use phenomenological qualitative research to gain an understanding of people's world view (Creswell, 2013). The use of any other designs for this research would not have provided a lens for understanding the meaning, structure, and the experience of this group of people on this phenomenon. Data analysis for the research centered on the understanding of the group on IPV, and how they arrived at that understanding before and after migrating to the United States. I performed data analysis through hand coding.

The hand coding first required me to read each participant's description of IPV with attention to the perception or reality (Creswell, 2014). Relevant information was extracted from the transcripts relating to the research questions (Creswell, 2014) and meanings formulated from what the participants understood about IPV before coming to the United States and understand now. The implications of the method were to make themes from the meanings and group the themes that are similar into clusters and then into subject categories (Creswell, 2014).

Definition of Terms

Acculturation: Cultural assimilation is when immigrants give up their cultural identity in exchange for the host culture (Berry, 1997).

Culture: Culture is the aggregate pattern of human behavior that includes, and is not limited to language, beliefs, values, thoughts, practices, communications, customs,

social norm, food, music, arts and institutions of a group of people i.e. ethnic, racial, religious and/or social groups (McKenzie, Pinger & Kotecki, 2005).

Government policy: Government Policy are codes, legislation, and regulations that guide human conduct including public health practice regarding prevention and treatment services and minimize the use of force in resolving conflicts and have legal implications (Teitelbaum & Wilensky 2013; Miller & Hutton 2004).

Immigration: Immigration is the act of entering a foreign country to live (McKenzie, Pinger & Kotecki, 2005).

Intimate partner violence (*IPV*): Intimate Partner Violence (IPV) also known as Domestic Violence (DV), is a physical assault, or a sexual or psychological abuse (including coercive tactics) perpetrated by a current or former spouse, boyfriend/girlfriend, dating partner or ongoing sexual partner (McKenzie, Pinger & Kotecki, 2005).

Marginalization: Marginalization is another acculturation strategy marginalization used to qualify immigrants who neither hold on to their original culture nor integrate into the new culture (Berry, 1997).

Migration: Migration is people moving from one geographical location such as a country to another (McKenzie, Pinger & Kotecki, 2005).

Nigeria: Nigeria is a West African country of Sub-Saharan Africa and Africa's most populous nation with more than 250 ethnic groups (Central Intelligent Agency [CIA], 2017). The most populous and politically influential ethnic groups are Hausa 29%, Yoruba 21%, and Igbo (Ibo) 18% (U.S. CIA, 2017).

Assumptions

I assumed that the 12 Nigerian men who participated in this research told the truth about their experiences of IPV when living in Nigeria and after immigrating to the United States.

Scope and Delimitations

As noted previously, IPV is a serious problem in every country in the world including the United States (W.H.O., n. d.). It is also clear that one of the factors associated with IPV is culture (Donohoe, 2014), what we do not know is how acculturation effects IPV when an individual migrates. I assumed that that cultural backgrounds and social interactions influence people's most basic cognitive processes such as the way they categorize and learn their causal reasoning and even attention and perception (Alves et al, 2016; Khan, 2014; Pierotti, 2013). This assumption drove me to focus on choosing to understand the potential change in the experiences of IPV of 12 Nigerian men living in New York City before and after emigrating to the United States.

The scope of this research was limited to the experiences of IPV of 12 Nigerian men, 30 to 60 years of age, who lived in New York City long enough to become acculturated. The choice to recruit from age 30 to 60 years is because scholars such as Shanahan (2000) described adulthood as social and subjective with the criteria in the United States including completing one's education, moving away from the family of origin, and beginning a career. Other measures include entering a marriage and becoming a parent (Arnett 1998; Levinson 1978; Shanahan, 2000). As per Pew Research Center (2017), approximately one in four adults ages 65 years and older experience memory

loss. Nigerian men older than 60 years may not, therefore, fully recollect their IPV experiences.

The data collection was from the face to face interviews of the 12 participants aimed at gaining an understanding of their experiences of IPV before and after they migrated to the United States. The central purpose was to understand whether acculturation influenced the men's understanding and experiences of IPV perpetration after immigration.

The theories used to guide this study were Berger and Lukemann's (1966) social construct of reality theory and the Lévi-Strauss culture theory of knowledge (1958). As outlined previously, these two theories were appropriate for this research because researchers have found a strong association between the underlying risk factors of IPV and social determinants of health such as cultural, social, and gender norms; unemployment and income inequality, social change, and limited educational opportunities; weak governance; and the poor rule of law (Onigbogi et al. 2015). I did not consider other theories for this study.

Generalization of this study is not possible because the number of participants was small. The findings are, therefore, unique to this limited number of individuals and population, but the research could still serve as a prototype model for another research study if the reader assesses the extent to which the researcher followed proper research practices. This dissertation was detailed so that there could be a repeat of the work in the future if not necessarily to gain the same results (Creswell, 2014: 204).

Limitations

CIA (2017) reported that in 2016, Nigeria had 186 million people and more than 250 ethnic groups with three largest ethnic groups as the Hausa at 29%, Yoruba at 21%, and Igbo (Ibo) at 18% of the population. To have all the ethnic groups represented in this research would have made it extensive and time consuming, as well as economically unfeasible for a dissertation. Furthermore, finding representation from all the ethnic groups in the United States, or New York City, might have been impossible. Therefore, I sought no specific ethnic group representation. Thus, the generalizability was limited to the 12 Nigerian men who lived in New York City and participated in this research.

Furthermore, because the sample was one of convenience, this research might not have captured other critical aspects of IPV experience such acculturation stress. Therefore, this research was confined to the participants' views on IPV before and after migrating to the United States.

Significance

I focused on the influence of acculturation on the experiences of IPV among Nigerian men living New York City. My intent was to make a significant contribution to the knowledge about the influence of acculturation on the experience of IPV among Nigerian immigrants. I also intended that the findings may provide information to the Nigerian community in New York City that might help solve the problem of IPV. I also sought any information that may help with the prevention of IPV in the Nigerian community. I believe this research is the first to explore if there are changes in the understanding and experience of IPV of the Nigerian Diaspora through that lens,

particularly among Nigerian men living in New York City. The influence of culture, social norms, immigration, and acculturation are subjective matters and are highly reflective of personal experience. Decker, Miller, Illangasekare, and Silverman (2013) postulated that IPV prevention begins primarily with an understanding of how people interpret IPV, and that understanding related to knowledge, attitude, and behavior in populations is fundamental to social change. Consequently, I explored what 12 Nigerian men living in New York City thought about IPV before and after immigrating to the United States to know whether immigration brought about a change in the understanding of IPV among the community of participants.

Social change relates to the fact that IPV has substantial consequences for victims and their families and puts a burden on families, health care providers, the justice system, law enforcement, and consequently, society. The aim of understanding the influence of acculturation on the behavior of the 12 Nigerian men who participated in this research toward IPV is to broaden the existing knowledge about IPV and help increase the awareness of IPV among the Nigerian born population. The findings of this research provided helpful information for recommendations on culturally appropriate support but not necessarily specific prevention programs on IPV for Nigerian migrants. More important, the recommendations could help policy makers and health care leaders in Nigeria to implement new policies or add to or change the existing policies, to prevent IPV.

Summary

To provide culturally sensitive IPV prevention programs for a social group requires a basic foundational understanding of their culture and view of the phenomenon (O'Brien & Macy, 2016). Ozer and Schwartz (2016) inferred that acculturative change begins with sustained contact between two individuals, or an individual and another social system. The authors further contended that to understand any contact resulting in cultural change. It is best to examine contemporary framing and historical contexts to contextualize behavioral differences pre and post contact. Thus, I explored the experiences of 12 Nigerian men living in New York City on IPV before and after migrating to the United States to understand their current experience on IPV. Implications of this research include advancing better IPV support intervention programs that can positively influence health outcomes of Nigerians in New York City.

Chapter 2: Literature Review

Introduction

This literature review focused on the factors influencing people's IPV experiences and provided context for the significance of a culture change on IPV. An analysis of acculturation was integral to this research because of the influence on the experiences of IPV among Nigerian born men living in New York City. I reviewed diverse research on Nigerian culture to provide context for domestic relationships. In addition to brief reviews of the literature surveyed, I clarified how other factors this study covered, such as laws against IPV, fit into the topic.

Literature Search Strategy

In the literature review, I focused on supporting the problem statement and purpose by outlining IPV issues in Nigeria to provide context relevant to how Nigerian men understood IPV before immigrating to the United States. This chapter also highlighted the United States laws that pertain to IPV that Nigerian men are exposed to when they move to the United States. Additionally, there is a discussion on the theoretical frameworks in this chapter.

I pulled information from several sources using Google Scholar and databases in the Walden University library using relevant search terms, including IPV and domestic violence. In narrowing the search, I used other search words such as *Nigeria, culture, culture change, perception, assimilation, separation, marginalization and the effect/influence of immigration/acculturation,* and *policy.* With these search terms, I conducted a broad search for literature on the topic. Another valuable resource was the

review of references from important articles. The literature reviewed indicated that culture has some measure of influence on IPV despite whether that culture has a domestic violence policy, which limited the content of the literature review to the influence of immigration and acculturation on IPV.

Review of Literature

Evidence is abundant on the role of culture and social interaction as notable contributors to knowledge of and influence on attitudes toward gender dynamics that may give rise to issues concerning women, such as IPV (Budgeon, 2013). Kastanakis and Voyer (2014) found that culture and social interaction influence behavioral processes (perception and cognition). Using policy as an instrument of culture change can offer the perspective of whether the policy can translate into individual level attitudinal change toward IPV or serve as a deterrent to the perpetration.

Cultural change is a multidimensional structure that embodies social relations, migration, and policy enactment (Edelstein, 2013). Johnsdotter and Essén (2015) inferred that immigration is the chief instrument of cultural change because of its ability to amend deeply rooted traditions that a person held in the home country. Tools that facilitate adaptation in the new country include the length of stay and reorientation, both of which can also facilitate insight into changing experiences of IPV among immigrants such as Nigerian born men living in New York City. A policy may also facilitate cultural change because it forces changes in behavior that are key to IPV prevention, such as when the law regulating domestic relations is different between the old and new cultures (Htun & Weldon, 2012). Some researchers, however, argued that despite the cultural and

structural variations, not everyone is receptive to the change. As some researchers suggest, anything that would alter the norms such as culture change can consequently serve as an essential strategy for challenging and transforming unequal social relations among men and women. Others argued that the traditional patriarchal tendencies and attitudes toward women persist despite acculturation (Denen, Asaju, & Bott, 2014). In the current study, I addressed whether culture change, acculturation, and laws against IPV influence the experience of Nigerian men in New York City.

Nigerian Cultural Perspectives on IPV

Scholars such as Nnadi (2012) and Denen et al. (2014) have documented evidence of Nigerian culture's influence on IPV. These and related studies added depth to the knowledge of social processes that inform the community's cultural beliefs that influence IPV. Nigerians (men or women) embrace culture according to their circumstance and ethnic group (Adogu et al., 2015). For example, according to Adogu et al., the military profession's nature likely affected the military community's attitude in the Federal Capital Territory, Abuja, Nigeria, toward IPV. Adogu et al. revealed that the military community in the Federal Capital Territory, Abuja, Nigeria, made an exception for wife beating when a woman denies her partner sex, whereas the civilian community made no exemption whatsoever.

Traditional gender roles in Nigeria primarily assign women a domestic role (Madu,2015). At the same time, men are free from household chores to go on and do as they please, which also acts as a reliable indicator of IPV (Makama, 2013). Nigerian women face abuse of any kind, often at the hands of their spouses and their family

members, including cowives (Makama, 2013). Drunkenness, financial hardship, and

rejection of a partner's advances are some other factors that influence such abuse

(Makama, 2013; Nnadi, 2012). Others include controlling behavior, lower socioeconomic

status, the couple's age disparity, and unemployment (Nnadi, 2012). There is also the

acceptance of violence as a chastisement tool and the belief that because money

exchanged hands during the marriage, a woman was bought (Makama, 2013; Nnadi,

2012). Child marriage and trafficking of women and girls, subjugation and exploitation of

females remains a practice in some parts of Nigeria (Nnadi, 2012). Women and children

in such conditions are subject to financial control, threats, and physical and sexual abuse

without intervention from family, the community, or law enforcement (Modi et al.,

2014).

The strong patriarchal societal structure in Nigeria allows men to marry as many

women as possible, especially when the current wife has yet to bear a child or cannot

have a child (Makama, 2013). This element of Nigerian societal practice and acceptance

exposes everyone in the relationship to HIV infection when one among them contracts it.

The women are blamed and humiliated more often than men when the husband may be

the primary source of such disease in the family. West (2016) addressed humiliation as a

form of emotional/psychological abuse.

In Nigeria, the predominantly male elders often preside during conflict resolution

in the home or local community (Akinsulure-Smith, Chu, Keatley, & Rasmussen, 2012).

These elders, mostly local lawmakers, do not usually view IPV as a crime or perceive it

as a public health problem (Akinsulere-Smith, et al.). Instead, they prioritize family unit

and preserving the culture, regardless of the marital relationship's health. Religion is another factor that takes the same approach to conflict resolution among couples (Bent-Goodley & Stennis, 2015). An integral aspect of Nigerian culture is religion, promoting maintaining the family unit and opposes divorce (Bent-Goodley & Stennis, 2015).

Jackobsson, Von-Borgstede, Krantz, and Spak (2013) found the three major religions in Nigeria (Christianity, Islam, and Traditionalist) still, to some degree, require the wife in Nigeria to be submissive and docile. This dynamic seems to foster abuse, and such abuse is present among religious factions (Jackobsson et al., 2013). According to the 2013 Nigeria Demographic and Health Survey (NDHS), the average percentage of women abused by their husbands or intimate partner among Christian denominations in Nigeria was 43.8%, among Muslims was 13.3%, and among Traditionalists was 36.6%. NDHS (2013) further showed that Nigeria's three religions are oppressive toward women and support issues that are against women, such as widowhood, wife inheritance, and female genital mutilation practices (Makama, 2013). Bent-Goodley and Stennis (2015) described IPV within church communities as a common practice of African ancestry.

Nigerian religions, especially within the traditional framework, teach boys and young men that violence and dominance over women are part of masculinity (Igwe, 2015). A systematic marginalization of women influences societal position regarding female value. It helps Nigerian society adopt such an attitude to stereotype men and women's roles and create inequality between genders (Waltermaurer, 2012). Based on this tradition, the public can justify IPV, particularly against women, especially since such a mindset goes without widespread challenge. This negative feature within the

community in Nigeria progresses generationally and is tolerant of men perpetrating IPV with impunity (Igwe, 2015).

The influence of culture on IPV among Nigerians is not an isolated instance. The Fulu, Jewkes, Roselli, and Garcia-Moreno (2013) multi-country cross-sectional research on men and IPV in Asia and the Pacific region showed that gender and relationship practices are principal factors in IPV perpetration in the countries studied. Most researchers agree that social norms across various countries, such as people's beliefs and attitudes toward IPV, are predictors of IPV (Linos, Slopen, Subramanian, Berkman, & Kawachi, 2013). That means the strong influence of cultural and social norms of violent behavior makes it imperative that efforts to prevent IPV should, therefore, consider the capacity of culture change and expectations to influence individual behavior.

Immigration

Bauder (2013) defines *immigration* as the act of a person or people relocating to another country to settle temporarily or permanently. The duration of the movement varies, but for this paper, the focus was on Nigerian men who relocated from Nigeria to New York City to live either semi-permanently or permanently.

Some research has shown that culture change and culture diffusion through immigration are potential IPV preventive measures (Abramsky et al. 2016; Pierotti, 2013;). Others disagree and insist that alteration in cultural and social norms through immigration does not influence men's perception of IPV (Fuchsel, Murphy & Dufresne, 2012). Most IPV prevention studies, however, have focused mainly on evaluation of responses to violence with mixed success of intervention programs for the abusers

(Beyer, Wallis & Hamberger, 2013). Norms can support and encourage the use of violence as much as they can protect against violence (Beauchamp, Lindsay, Hunter, & Talavera, 2012; Beyer, Wallis & Hamberger, 2013; Cho, 2012; Whitaker, Murphy, Eckhardt, Hodges, & Cowart, 2013). This research explored whether culture change, acculturation, and laws against IPV in the United States influenced the experience of IPV of 12 Nigerian men in New York City.

Immigration to the United States creates a real threat to the patriarchal cultural norms for Nigerian men. One of the challenges to those cultural norms is that the United States has laws that penalize IPV perpetrators. Kim and Sung (2015) suggested that the fact perpetrators of IPV in the United States are held responsible for their actions could serve as a preventive measure (deterrent) for some people. Other researchers such as Mose (2015) and Kalunta-Crumpton (2013) found that United States-based African immigrant families, of which Nigeria is a part, face economic-based gender role reversal and acculturation stressors. Sabina, Cuevas, and Schally (2013) also identified that immigration/acculturation empowers abused immigrant women to report the abuse, mainly when they cannot choose between deportation and an abusive lifestyle, and that could pose a threat to some immigrant men.

Acculturation

Immigration brings about contact between cultures, whereas acculturation mirrors cultural integration by altering collective activities through social interaction and social institutions. Such contact between two cultures is a source of cultural and psychological changes (Beery, 1997; Rudnev, 2014). On the cultural level, values are highly likely to

change after immigrating to a new country (Rudnev, 2014). Psychologically, or at the individual level, a person's behavior changes through social practices/interactions and sometimes due to experiencing stress (Prieto, Sagafi-nejad, & Janamanchi, 2013). Research findings most commonly discovered at the individual level are that people acculturate and adapt differently to a new environment (Prieto, Sagafi-nejad, & Janamanchi, 2013). Prieto, Sagafi-nejad, and Janamanchi (2013) also added that often those who engage in their heritage culture in the host society adapt better than those who acculturate through assimilation, separation, or marginalization.

Prieto, Sagafi-Nejad, and Janamanchi (2013) revealed that the results of the decades' long work of researchers on the association between acculturation and abuse are mixed. For example, some studies such as Edelstein (2013) reported acculturation as a risk factor for IPV, whereas other researchers such as Ramos (2013) described it as a protective factor against IPV. This research aimed to understand the potential role of acculturation to IPV among Nigerian immigrant men in New York City. The principal goal was to determine whether acculturation as a process of learning a new way of life mitigates and prevents IPV or enhances or allows IPV practice among the target population.

Perception

Perception is prone to different interpretations, but in the broadest sense, perception is a matter of interaction between the world and self (Kastanakis & Voyer, 2013). Simultaneously, the environment (world) feeds people information that they, in turn, give meaning to by interpreting and acting upon it (Bardi, Buchanan, Goodwin,

Slabu & Robinson, 2014). Worldview evolves and is influenced primarily by the environment, education, and culture (Kastanakis & Voyer, 2013).

Nigerian men living in New York learn the reality of their new surroundings' elements on a mental (psychological) level or through physical (social) interaction. Such awareness usually necessitates alteration in immigrants' normative behavior like Nigerian men in New York City or how they thought about or understood things such as IPV before immigrating to the United States (Kastanakis & Voyer, 2013). That bears out that perception is both the ability to register sensory stimuli and the necessary cognitive mechanisms that serve as conduits to interpreting and understanding the materials our senses bring to us (Kanstanakis & Voyer, 2013). In other words, perception is a matter of interpretation as it can differentiate between what is right or appropriate (Kanstanakis & Voyer, 2013).

The United States' social norms differ from those in Nigeria. In the United States, relationships mean a unified category of meaning that facilitates the interpretation of the social practice of gender equality and women's rights (Pierotti, 2013). Also, in the United States, the law protects men and women equally (Modi et al., 2014). Although the enforcement of some laws is unequal, women in the United States are culturally and in policy viewed equal to men (Pew Research Center, 2013). There is also a flexible division of gender roles in the U. S. instead of the Nigerian patriarchal social structure. Pew Research (2015) noted that an American man might generally help with house chores and not see it as a weakness. But Akanle, Adesina, and Ogbimi's (2016) found that the Nigerian cultural norm encourages men to seek to be served by women instead of

serving. The United States practice of a nuclear family system supports men in focusing on their immediate family compared to the burden an extended family system puts on relationships in Nigeria (Pierotti, 2013). American culture encourages education for every gender, and women worry less about being good wives (Pew Research, 2015). That's some of the distinctions between the two cultures, Nigeria and the United States, on how perceptions of gender roles differ. Women's rights and gender relations in America are a challenge for some Nigerian men in New York City and can influence their attitude toward IPV (Kalunta-Crompton, 2013). Kalunta-Crompton noted that the challenge in living in the United States is not necessarily to the Nigerian male's manhood, but rather a challenge to how they see themselves to women. This viewpoint analysis introduces a new way of perceiving women that is, in part, facilitated by culture change and law.

Yamawaki, Ochoa-Shipp, Pulsipher, Harlos, and Swindler (2012) argued that people's perception of IPV influenced their response to it. For example, Native American men viewed IPV as a disease of "outside people" because these men did not believe that IPV was a part of their tradition or culture, but a problem brought by colonization and the introduction of alcohol in their environment (Matamonasa-Bennett, 2014). There was no evidence in this research that showed Nigerian men living in New York City believe IPV is not a problem related to the country's culture.

Laws

The law against IPV is another challenge for Nigerian men living in New York City, given that Nigeria has no national law against domestic violence yet (Madu, 2015). The Nigerian Constitution recognizes IPV as a violation of fundamental human rights but

has no legal provisions that prevent IPV against women (Madu, 2015). Without the law regarding violence against women and girls in a country such as Nigeria, the Constitution may contradict itself about the value of a woman's life (Madu, 2015). Madu further implied that without corresponding domestic violence laws, the 1985 international treaty that Nigeria ratified on the Convention on Elimination of Discrimination against Women is moot.

The Nigeria House of Assembly passed the Violence Against Persons Bill in 2013 and is still waiting for Senate approval to become law (Madu, 2015). Healthcare workers on the front lines in the battle to identify victims of IPV and find organizations that can help them cannot advocate for these individuals adequately without guidance by the law (Nnadi, 2015). The lack of clarity and direction the law provides challenges practitioners in evaluating the decision to report and to whom to report when they encounter IPV victims. The police also lack the guidelines for holding perpetrators accountable (Nnadi, 2015), thereby enabling a controversial stance that the government tolerates IPV. Nnadi (2015) added that the conviction rate for IPV is so low that Amnesty International has emphatically criticized Nigeria's judicial system for its generally lax protections for women. Some advocates believe IPV victims' safety depends on offender accountability using the law (Cissner et al., 2013).

The United States' approach to the handling of IPV related cases is almost the reverse of Nigeria. Evidence shows that in the United States, the law has a role in addressing IPV from prevention, victim services, and prosecution (Modi et al., 2014). The United States Violence Against Women Act (VAWA) addresses IPV by altering the

mechanism within the social structure, perspective, rules of behavior, or value systems and clarifies IPV issues (Modi et al., 2014).

The United States national and state domestic violence policy strategies provide a framework that guides individual behavior in a social structure and holds perpetrators accountable for their actions (Modi et al., 2014). The law against IPV also helps create awareness to reject IPV and provides an opportunity for individual level attitudinal change (Pierotti, 2013). It equally presents as a deterrent from perpetrating IPV and makes prevention more efficient (Modi et al., 2014). In the case of immigrant men, the penalty against IPV perpetration includes potential incarceration for physical assault, rape (even if the intimate partner is a wife), revoking immigration privileges, and other enforceable consequences (Modi et al., 2014). Policy also clarifies for practitioners and law enforcement officers, such as the police, what to do when making and evaluating decisions about IPV or when there seems to be a conflict between what constitutes character and values (Modi et al., 2014).

Using domestic violence policy to create awareness about IPV and as a preventive tool like in health promotion would require understanding the influence of policy on people's perception of IPV (Modi et al., 2014). Research has only recently begun to focus on structural interventions to address IPV (Modi et al., 2014). Woodhouse and Dempsey (2016) reported that the United Kingdom experienced a decline of IPV in 1981 and from 2004 to 2005 because of domestic violence policies. The enactment of the United States' VAWA of 1994 was also to protect IPV victims and has morphed progressively to

include giving visas to immigrants who are victims of IPV to counter victimization (Modi et al., 2014).

As stated previously, the VAWA addresses IPV on three fronts: prevention, victim services, and prosecution (Modi, Palmer, & Armstrong, 2014). The Bureau of Justice Statistics shows a record of a decline in IPV victimization in the United States due to the VAWA (Modi et al., 2014). Modi et al. also reported that because of VAWA, victimization among females (12 years old or older) dropped from 9.4 to 4.3 per 1,000. Among men, victimization fell to 0.8 per 1,000 from 1.8, demonstrating reductions of 53% for women and 54% for men during the same period (Modi et al., 2014). Overall, there was a decline in victimization from approximately 2.1 million victims in 1994 to around 907,000 in 2010 (Modi et al., 2014). Enforcing the VAWA laws since the United States legislation has led to a decline in the rate of IPV against women (Modi et al., 2014).

The United States VAWA also protects immigrants (Human Rights Watch US, 2013). It grants the U visa (a temporary stay visa) to victims of IPV who are immigrants while investigating the perpetrator's case and possible prosecution (Human Rights Watch US, 2013). The outcome of prosecuting VAWA cases included a 26% and 36% decrease in IPV related homicides of women and men, respectively, between 1993 and 2007 (Modi et al., 2014). In the same study by Modi et al. through the University of Kentucky, students showed a 51% increase in IPV reporting, a 63% decrease in nonfatal violence, and a 24% reduction in fatal violence after the passing of the mandatory arrest law. Female students expressed that they felt safer and empowered with the policy of

compulsory detention. This research explored how the understanding of IPV laws in the United States might have influenced the experience of Nigeria born men living in New York City.

Conclusion

The literature review revealed that government intervention on IPV using domestic violence policies is evolving (Modi et al., 2014). What is lacking is scholarship on understanding the effect of domestic violence policy in society, mainly immigrants from countries without policies against IPV to those nations with domestic violence policies. The existing research on government intervention on IPV focused mostly on preventive programs, evaluations of secondary programs, and responses to violence, not the role of policy against IPV (Pierotti, 2013). An examination of the effect of spreading ideas among the average people in the society through domestic violence policy to prevent IPV showed it could provide valuable lessons for countries without domestic violence policy or those that have it but are not enforcing it. The policies targeted at ending IPV can also benefit immigrants such as Nigerian men living in New York City to avoid prosecution by creating the awareness that while IPV was allowed in their country, they must adapt within the United States.

Research on the influence of domestic violence policy on IPV continues to expand. There is an abundance of research on the influence of culture, neighborhood, gender, attitudes, lack of knowledge, and even healthcare providers' beliefs on the experience and response to IPV (Mose, & Gillum, 2015; Prieto, Sagafi-nejad, & Janamanchi, 2013). The emerging themes from other explorations that I reviewed include

gaps in the influence of domestic violence policy as a culture change agent on the experience of IPV of any group of immigrants. The existing research on the influence of immigration and acculturation on IPV is limited and mostly on refugees. This research intended to aid in closing this gap.

Chapter three restates the research's purpose, identifies the research tradition, describes the research methodology, and the reason for the design choice. The chapter also portrays the researcher's role, ethical concerns related to the participants' treatment prior, during, and after the data collection and addresses them. The discussion in chapter three also includes details on data collection, strategies with which I established the credibility, transferability, dependability, and confirmability.

Chapter 3: Research Method

Introduction

The central concept of this research is the influence of acculturation on the experience of IPV on Nigerian men living in New York City. The recent findings on the influence of migration on IPV are either risk factors or safety measures (Nava, McFarlane, Gilroy & Maddoux, 2014). In some other literary works, the legal system's use as a strategy for the prevention of IPV shows that not all societies and cultures have legal protection for the survivors of IPV (Pierotti, 2013). The distinct and disparate behaviors and practices that some of these articles revealed raise some questions and suggested the need to incorporate cultural dynamics notions as they relate to behavior change and societal outcomes (O'Brien & Macy, 2016). This research aimed to discover the influence of cultural change on a person's experiences that could potentially affect the reorganization of thoughts and actions within the communities living in the United States, including immigrants such as Nigerian men living in New York City.

The purpose of this qualitative phenomenologically designed research was to understand the experiences that Nigerian men living in New York City have with IPV and explore their experiences when they lived within their local communities in Nigeria. This goal was essential considering globalization has advanced the rapid interchange of products and the accompanying international integration of and changes in ideas, worldviews, and other aspects of culture (Ortega & Peri, 2013; Flew & Waisbord, 2015).

The advancement in telecommunications infrastructure, including the rise of the internet and social media websites such as Facebook, YouTube, Twitter, and Snapchat, serve as significant factors generating further interdependence of cultural activities (Flew & Waisbord, 2015). The interconnectedness of the world demonstrates the necessity to understand better, evaluate, and respond to IPV among cultures such as Nigerian men living in New York City, and to activate prevention policies that can reach global communities, even the most rigid and traditional ones.

This chapter contains a restated purpose of this research, research questions, and the central concepts of the phenomenon, IPV. The discussion also includes an overview of the research methodology followed in researching the adopted research design, data collection process, sampling plan, and justification for the chosen research design.

Research Design and Rationale

Qualitative Phenomenological Research

Quantitative and qualitative research methods explore phenomena through data collection (Creswell, 2014). Until relatively recently, qualitative research arguably was not taken as seriously as quantitative studies because it does not help develop hypotheses and is not considered empirical (Shosha, n. d). Bourgeault, Dingwall, & de Vries (2013) suggested that such a line of argument has changed as increasingly, qualitative phenomenological research contributes to the evidence base in all practice and policy areas. Yilmaz (2014) further surmised that qualitative research not being empirical exists among academics and not necessarily scholars.

Qualitative research findings can inform evidence based practice for decision making by professionals, policymakers, advocates, and laypeople as can quantitative and mixed methods research (Bourgeault, Dingwall, & de Vries 2013; Creswell, 2013 & 2014; Patton, 2002 & 2014). Bourgeault et al., Creswell, and Patton distinguished the unique difference between the two research designs as quantitative research makes predictions and tests hypotheses to explain phenomena, whereas qualitative research explores the nature and meaning of phenomena.

Qualitative research is also different from quantitative research in the data collection process, the emphasis of study, and the overall purpose of the research (Creswell, 2014). Quantitative research collects precise measurements about the phenomena utilizing validated instruments and the deductive analytic approach (Creswell, 2014). In contrast, qualitative research allows a researcher to explore a phenomenon using rich textual information generated through an inductive approach (Creswell, 2014). Qualitative research examines human behavior through a dynamic, subjective, and natural lens to understand the phenomenon (Creswell, 2014). The researcher gathers a combination of empirical materials and observer perspectives about the phenomenon under study to capture the phenomenon's multiple realities as they evolve through the participants' narratives (Creswell, 2014).

Rationale for Qualitative Design

This research used a qualitative design because it fits the tradition of understanding any phenomenon, that is, an occurrence or event observed, such as IPV among Nigerian men living in New York City (Patton, 2015). Quantitative research

explains phenomena through quantitative data (Bourgeault et al.2013; Creswell, 2013 & 2014; Patton, 2002 & 2014). Qualitative research is a logical process of exploring and understanding human behavior in or perception of their immediate environment (Bourgeault et al. 2013; Creswell, 2013, 2014 & Patton, 2002 & 2014). This research was exploratory research on Nigerian men's IPV experience in New York City that helps fill the research gap as identified in Chapter 1.

The strategy that I used was in line with conducting phenomenological research using open ended, in depth interviews of 12 Nigerian men living in New York City. As a qualitative phenomenological research study, the participants had the flexibility in sharing their views and experiences (Creswell, 2014), as well as an opportunity for me to probe for responses that might not have been clear or even responses that may not have been documented by other researchers (Yilmaz, 2013). Both qualitative and quantitative research designs produce knowledge through data collection. However, the quantitative model analyzes its data comparing it to an existing cause (independent variable) or uses statistics to measure the degree of relationship between two or more variables (Creswell, 14, p12).

Historical Context of Phenomenology

According to Kafle (2013), Phenomenology is both a philosophical movement and a range of research methods. Khan (2014) conveyed the concept *phenomenon* as originating from the Greek term, *phaenesthai*. *Phaenesthai* means to appear, come into sight, or become visible (Khan, 2014). As a philosophy, Khan (2014) and Farina (2014) associated the term phenomenon with the act of bringing into light (enlightenment). In

research, Kafle (2013) posited a phenomenon as the perception of an object or situation

and attributed the introduction of the phenomenological theory of knowledge to a

German philosopher, Immanuel Kant (1724-1804). According to Kafle (2013), Kant

(1770) contended that knowledge does not come from experience alone, but also the

perception of the external environment. Kant asserted that the external world provides

sensory stimuli that the mind processes and interprets according to how it is

comprehended or understood (Kafle, 2014). In that context, the experience becomes both

knowledge with and without any experience. People could also gain knowledge from

perception (meaning) of external objects such as society (Kafle, 2013). Khan (2014)

added that Kant (1770) based his argument on using phenomenological theory for

research because traditional science seeks to explain phenomena instead of gaining a

deeper understanding of the phenomenon's meaning.

Kafle (2013) postulated that theorists such as Heidegger (1889-1976) developed

the different approaches to the phenomenological project by disbanding phenomenology

as a philosophical discipline. Kafle also indicated that rather than focus on consciousness

and the nature of phenomena, Heidegger moved towards developing existential and

hermeneutic (interpretive) dimensions. Nevertheless, Moussakas (1994) argued that

whereas Kant might have established the theory of the phenomenon, Edmund Husserl

developed the actual concept of phenomenology with his emphasis on the

interconnectedness of individual consciousness of the external world. Kafle (2013)

defined Phenomenology as studying the nature and meanings of phenomena through

human experience or consciousness.

Phenomenological research studies the meaning and significance of a phenomenon with the participants' experience or understanding (Kafle, 2013; Khan, 2014 & Farina, 2014). Shosha (n. d.) pointed to Kant's (1770) contention that the researcher should not only seek knowledge about the actual external experience from participants. Instead, he or she must also include the feelings, thoughts, and perceptions the participants have about the phenomenon (Shosha, n. d.). Moussakas (1994) added that Husserl (1970) noted that the reason to include the feelings, thoughts, and perceptions the participants have about the phenomenon is that human consciousness creates experiences, which, if documented, can be invaluable to assess a phenomenon accurately. As Shosha (n. d) noted, other phenomenological approaches have since emerged.

Phenomenological Approaches

This research applied a descriptive phenomenology approach using an open coding strategy. Most of the literature I reviewed, including Creswell (2013), agreed that phenomenology has two primary approaches. They are interpretive hermeneutic phenomenology developed by Heidegger (1889 – 1976) and descriptive phenomenology developed by Husserl (1920). Researchers use both methods to study human experiences from the participant's perspectives, sometimes with an overlap (Creswell, 2013; Patton, 2014; Sargeant, 2012 & Shosha n.d.). Descriptive phenomenology explores the true meanings of a phenomenon by engaging in the process of discovery into the participants' in depth reality (Creswell, 2013, Patton, 2014; Sargeant, 2012 &Shosha n. d.). Shosha (n.d.) added that in conducting a descriptive phenomenological study, Husserl (1920) put forward that the researcher must declare and put aside potential personal biases,

assumptions, and presuppositions (bracketing). The aim of bracketing is so the researcher can focus the phenomenological perspective through describing participants' narrative of the phenomenon than what is already known or documented by other researchers (Shosha, n. d.). According to Shosha, Husserl's (1920) suggestion that the researcher suspends imposing his or her presumptions, preconceived notions, or opinions on the data collection process or the data structure, or the data itself is to enhance the validity of the research. Framing the data collected from the participants' perspectives and experiences are integral to a successful phenomenological assessment.

Chan, Fung, and Chien (2013) described bracketing as a measure that helps ensure the researcher does not allow his or her opinion or experience to influences the validity of data gathering and analysis. Moussakas (1994) further posit that Husserl believed that bracketing is essential in gaining insight into any lived experience features.

Open coding data analysis is an inductive means of interpreting qualitative data to determine meaningful and useful information (Shosha, n.d.). The steps in qualitative data analysis in which identified significant statements get organized into themes or categories is known as open coding. The researcher first reads a description of each participant's transcripts to understand their background (Miles & Huberman, 1994; Sargeant, 2012 & Shosha, n. d.). He or she then extracts significant statements to the research question, such as descriptions of how Nigerian men living in New York City now think or feel about IPV. After that, the data should reflect significant statements, including direct quotations from the participants (Miles & Huberman, 1994; Sargeant, 2012; Shosha, n.d.). The process continues by articulating the meanings attached to the significant

statements and creating themes from the meanings. Similar themes are then grouped and organized into categories (Miles, Huberman & Saldaňa 1994; Sargeant, 2012 & Shosha, n. d.). Finally, the results are compiled to provide a comprehensive description of the topic and return later to each participant to verify the results (Shosha, n. d; Miles & Huberman, 1994; Sargeant, 2012).

Shosha (n. d) inferred that using these steps analyzes the data collected in a survey or interview. Creswell (2013) and Patton (2013) pointed to the researcher using a reflexive diary to enhance a researcher's skills and decision making in phenomenological research. While the data collection process is similar to how the phenomenological research works, how the researcher treats the data is nevertheless distinct: the researcher is much more involved, for example, in determining what is significant, versus what is not (Yüksel & Yıldırım, 2015). According to Yüksel and Yıldırım, the researcher's voice has more credence to the subjective experiences and perceptions of the participants. Yüksel and Yıldırım further noted that whether through experience or literature review, the researcher's uncovering of the existing body of knowledge before initiating the research adds significant credibility to the data analysis process and, consequently, the results.

Rationale for choosing phenomenological method

The phenomenological approach to qualitative research accurately describes people's lived experiences and what those experiences mean to those who lived it (Farina, 2014; Kafle, 2013; & Khan, 2014). Such was the goal of this research in which Nigerian men described their experiences with IPV, first while living in Nigeria, and then

living in New York. Kafle (2013), Khan (2014), and Farina (2014) agreed that the goal of the Phenomenological research approach is to understand others' worldviews and how such views may differ from commonly or initially held views, and of course, what may have brought about the change in worldview. Kafle, Khan, and Farina further inferred that analysis should focus on the persons' (participants') subjective interpretations of their experiences instead of a researched or imposed perception.

Creswell (2014) described the essential characteristics of a qualitative paradigm as a research method with a distinct approach to answering questions of interest, and the evidence or findings are not predetermined. The researcher instead goes where the evidence leads with the possibility of a generalization of the results (Creswell, 2014). Patton (2014) added that a qualitative phenomenological research design seeks to understand the research problem from the participants' perspective. Qualitative research takes place in a natural setting and is culture/context bound with the researcher as an essential instrument for using the tacit/implicit knowledge (Creswell, 2014 & Patton, 2014). Sampling is typically purposive and data analysis is inductive and deductive (Creswell, 2014 & Patton, 2014).

The choice to use qualitative phenomenological design for this research was because of the unique ability to capture the central point in understanding the experience of the human phenomenon IPV among Nigerian men living in New York City. A qualitative phenomenological design was most appropriate for this research because primarily it explored IPV from the knowledge, understanding, opinions, and feelings of 12 Nigerian men living in New York (Creswell, 2014; Miles et al.,1994; Patton, 2014;

Sargeant, 2012; Shosha, n. d.). This goal aligned with the philosophy, strategies, and intentions of the qualitative phenomenological paradigm. The quantitative research method was not appropriate for this research because it was not statistically significant, and the results tended to be exploratory rather than decisive.

As a phenomenological paradigm requirement, the Nigerian men living in New York could construct IPV's multiple realities. The aim of using a phenomenological paradigm for this research was to determine what Nigerian men living in New York understood about IPV since moving to the United States either from social relations or experience and their ability to provide a comprehensive description of the phenomenon. The means of data collection was a semi structured interview. The distinguishing characteristic of the qualitative interview is that it typically facilitates an exploration of participants' authenticity and the situation(s) that affected their learning and the subjective observations during the interaction (Maxwell, 2013; Patton, 2014; Yüksel & Yıldırım, 2015). With the open coding method of data analysis, the focus was on categorizing the target group's views (Shosha, n. d.). According to Shosha, the design follows a series of steps in concluding the process of data collection and analysis.

The semi structured interview used in this research was standardized, informal, and interactive. It involved a series of open ended questions designed to evoke a comprehensive exploration of the experience on IPV of the participants and any connection to culture and immigration to the United States. Additionally, some questions described the participants' specific characteristics, such as educational level, years of stay in the United States, and IPV experience. These concepts were vital because they

provided information regarding the exposure of the 12 Nigerian born men living in New York City was to the United States culturally distinct practices. Generally, the more educated the participants are within American institutions, the more likely they are exposed to different ideas about IPV (Sabina, 2013). The central research question in this phenomenological study was:

What are the experiences of Nigerian born men regarding IPV perpetration while living in New York City and Nigeria?

Advantages Over Other Methods

The use of the phenomenological method for this type of research has some advantages over other qualitative methods. This research was about Nigerian men living in New York. It was not to discover a cultural phenomenon, but rather the influence of culture on a phenomenon (Miles et al., 1994). Ethnography would have, therefore, not been right for the study. Ethnographers seek to understand how people make sense of a phenomenon in another culture to become functioning members of that community (Patton, 2014). In ethnographic research, the data analysis is from using the subject's viewpoint. The researcher lives within the community, and systemically observes the community's subjects where they live during an extended period, which was not the case in this study (Patton, 2014). Time was of the essence in this research because it is a dissertation and had a limited period that the research needed to finish (Rudestam & Newton, 2015).

Grounded Theory and phenomenology have things in common, such as researching real life situations, but their data collection and the analytic process are

different (Patton, 2014). Patton inferred that grounded theory compares data collected from many sources, whereas phenomenology collects data from individuals and describes their experiences. Grounded theory employs the use of data analysis to extract a theory and concept almost in reverse from the conduct of social science research genre because, as Creswell (2013), Patton (2014) and Miles et al. (1994) suggested, Grounded Theory seeks all data sources that contribute to theory development in other research design, whereas theories guide the phenomenology research process. The pursuit of this research was not to extract a theory or theories from the data. Instead, the 1960's Berger and Lukemann social construct of reality theory and the Lévi-Strauss culture theory of knowledge (1958) guided the research process. Grounded theory would not have, therefore, served this research well.

Hermeneutics and phenomenology data interpretation are similar, except hermeneutics puts an effort in intentionality behind the objective nature of the things as realized by an individual by going beyond subjective experience such as images to find the meaning (Kafle, 2014). A heuristic research paradigm is a phenomenological inquiry, but it focuses on the researcher and participant(s)'s personal experiences (Patton, 2014). Moussakas (1994) described empirical phenomenological research as grounded in experience or understanding obtained through a comprehensive description of the phenomenon. For all these reasons, the descriptive phenomenological paradigm was the best approach to studying IPV experiences among Nigerian born immigrant males living in New York City.

The descriptive phenomenological research method's additional aims and advantages are that it opens new perspectives on what is known and discovers new knowledge through data analysis (Patton, 2014). This research included how culture change, acculturation, policy enforcement, and gender role reversal can influence people's IPV experience. Relative to health, IPV is potentially detrimental, and qualitative research has contributed substantially in identifying knowledge, concepts, and theories that inform health professionals in inpatient care, including culture (cultural competence) (Bourgeault et al.,2013). Creswell (2013) added that qualitative phenomenological research helps to dive deeper into the problem and uncover trends in thought and opinions through data analysis, contributing to a more comprehensive understanding of the phenomenon.

Role of the Researcher

There was the potential for researcher bias in analyzing the data because I had a significant role in the data collection process. However, I was there to ensure the integrity of the data collected and act as a membrane to weed out data that might not add to the research's discovering purpose (Creswell, 2013; Creswell, 2014; Maxwell, 2013; Patton, 2014). In qualitative research, the researcher's function is to monitor the process and ensure the data collection quality (Creswell, 2013; Creswell, 2014; Patton, 2014). Quality assurance preceded the data collection and focused on "prevention" such as forestalling problems with data collection (Creswell, 2013; Creswell, 2014; Yüksel & Yıldırım 2015). Data monitoring or quality control activities can occur during or after the data collection (Yüksel & Yıldırım 2015).

Yüksel and Yıldırım (2015) indicated that prevention of low grade or degraded data is proactive and the most cost-effective means of ensuring the integrity of data collection. The best demonstration of the measure is through the development of a comprehensive and detailed standardized protocol and procedure manual for data collection (Yüksel & Yıldırım 2015). Such a protocol reduces the risk of failing to identify problems and errors early in the research, mainly when the absence of such a protocol may produce an unfit data collection process and incorrect results. Yüksel and Yıldırım added that a well designed collection and monitoring tool prevents errors in individual data items and systemic errors. Individual data items and systemic errors could call attention to the violation of protocol and present ethical misconduct.

Another aspect of the research that I paid attention to was whom to recruit as participants. I did not include people with whom I had personal and professional relationships to avoid power over the participants and allow participants to express their views, opinions freely, and, most importantly, their experiences without fear of reprisal (Sargeant, 2012).). However, as someone known in the Nigerian social sphere in New York, getting twelve people that did not know who I was proved difficult. As Bourgeault et al. (2013) suggested, I disclosed it in the limitation section of the study write up to avoid a bias of the process. Those that I knew received instructions on boundaries that included not discussing the research topic outside the interview forum until the research was completed (Sargeant, 2012).

Conducting interviews with participants known to a researcher poses a challenge such as an inherent mistrust by participants that the researcher has a hidden agenda

(Sargeant, 2012). That could hinder a participant from opening up or cause them to be more expressive during the interview for fear of reprisals (Sargeant, 2012). The situation could be worse if a participant feels the information relates to the researcher. Thus, in this research, I emphasized to the participants that I would maintain their confidentiality throughout the research process. I instructed them that the study was not about me to whatever level they may know me, and the information they supplied would be confidential. The report would not and did bear the names of the participants. Instead, I used identifiers to protect their confidentiality (Sargeant, 2012) unless information revealed either a participant or a name provided during the interview was currently in a violent relationship or a perpetrator (NIH, 2012), that would have required notifying the appropriate agency of the incident (NIH, 2012).

To manage the researcher bias, I recorded my thoughts in a journal. That helped to bracket my preconceived notions and beliefs about IPV during interviewing hours (Berger, 2015). Again, to avoid potential researcher biases, I implemented such protocols as reflexivity to maintain the integrity of research results. Reflexivity is the researcher's reflection on how not to affect the interpretation formed during a study with potential personal bias, values, or background, but instead, examine the data and develop interpretation honestly throughout the process using a reflexive diary (Berger, 2015). Berger suggested that researchers write their thoughts, feelings, and experiences down in a reflexive journal to reexamine positions when issues would arise that might affect the research process.

Methodology

Creswell (2014) and Maxwell (2013) explained methodology as describing how, when, and where the researcher will collect and analyze the research data. Sargeant (2012) added that data collection is a process by which the researcher measures information gathered to answer the research questions and evaluate outcomes. Despite the preferred research method (quantitative or qualitative), all research fields require accurate and honest data collection (Sargeant, 2012). That goal is achievable by selecting appropriate data collection instruments (existing, modified, or newly developed) and laid out instructions for their correct use. The literature I reviewed, including Creswell (2014), agreed that ensuring accurate and honest data collection reduces the likelihood of errors occurring and captures quality evidence that yields rich data analysis and gives credence to the research questions' answers.

Participant Selection Logic

According to Creswell (2013), Miles et al. (1994), and Patton (2014), sampling is the selection of individuals, units, and research settings. The data collected in this research was from the semi structured interviews of 12 Nigeria born men between the ages of 30 to 60 years old living in New York City. They lived in the United States for five years or more and became acculturated to American society. Additionally, they needed to have witnessed/experienced a woman being a victim of IPV in Nigeria and/or the United States and speak, write, understand English, and share his IPV experience. The choice to recruit from age 30 came from the description of adulthood by such scholars as Shanahan (2000). Shanahan characterized adulthood as social and subjective

and that in the United States, the criteria are completing one's education, moving away from the family of origin, and beginning a career. Other measures include entering a marriage and becoming a parent (Arnett, 1998; Levinson, 1978; Shanahan, 2000). As per Pew Research Center (2017), about one in four adults ages 65 years and older experience memory loss. Nigerian men above 60 may not, therefore, fully recollect their IPV experiences.

Creswell (2014) and Patton (2014) indicated that phenomenology dictates the research method, but the research questions also drive the participants' selection. Patton (2014) explained further, saying there are no methodological rules, but instead, the methodology employs purposeful strategies for qualitative inquiry. That means that, according to Patton (2014), there is no explicit process for data collection and management in qualitative research. It is a matter of the situation (research problem), the nature of the inquiry, and the characteristics of the researcher's setting and skills (Patton, 2014). Another consideration in collecting data for qualitative research includes the researcher's interest and point of view brought to the engagement from which the research of an issue or phenomenon originates (Patton, 2014). The authors' constant themes are guidelines and strategic ideas that researchers should consider for naturalistic, field based research, making qualitative research unique.

This research followed the principles that guide phenomenological inquiry when selecting a sample (Sargeant, 2012; Shosha, n. d.). First, participants demonstrated basic knowledge of the phenomenon under study and were willing to discuss it (Sargeant, 2012; Shosha, n. d.). Second, they participated in at least one interview session and

narrated their experience (Sargeant, 2012). The research process also followed Creswell's (2013) recommendation for purposeful sampling for phenomenological research because it allowed me to select participants based on the research design. The nature of this research required relatively homogenous participants (Creswell; 2013; Sargeant, 2012; Shosha, n. d.). Purposeful sampling was appropriate for this research in that the participants were homogenous (Nigerian born men living in New York City).

Homogeneity is particularly useful in exploratory research when finding whether the problem or issue exists quickly and inexpensively. Participants in this research were Nigerian born men living in New York City who have experienced or witnessed IPV.

Participant selection also included chain referral or snowballing sampling. Patton (2014) described snowballing, or chain referral sampling as people with knowledge of the research and suitable participants referring participants to the researcher. In the event of difficulty recruiting enough participants, I made provision that those who volunteered could help recruit other willing participants, which authors such as Creswell (2013) and Maxwell (2013) described as a function of snowballing or chain referral sampling. There were two participants in this research recruited through snowballing. The sample size was 12 Nigerian men living in New York City. They lived in New York, not necessarily in New York City for the entire period. The participants in this research, however, were current residents in New York City. Nigeria has more than 250 ethnic groups (CIA, 2016), which would have been too many (sample size) to represent this research. For financial and time implications and the nature of the research (dissertation), participants included men from any part of Nigeria before immigration.

The literature review showed that qualitative research utilizes fewer people than quantitative research. Creswell (2014) and Patton (2014) suggested a number at least 10, in which Creswell (2014) recommended that the researcher conducts lengthy interviews to reach saturation or reach a place of understanding the phenomenon through the participants' thick, rich descriptions. Creswell (2014) defined saturation as a theoretical reference of a data analysis phase where no new information emerges. A sample size of 12 was adequate for this research based on the literature. Bourgeault et al. (2013) agreed that 6-10 participants are appropriate in a research in which uses semi structured approaches to examine experiences and perspectives within a defined population group as long as the interview produces enough data to balance against the amount of information generated and the analytic risk of redundancy it at poses some point. This research is a dissertation project in which time is essential (Rudestam & Newton, 2015). Analyzing 12 participants' interviews allowed meeting the fixed period for the research.

Instrumentation

There are various ways to collect qualitative data using the interview technique. That includes the informal, conversational interview that allows no predetermination of questions before the interview (Creswell, 2014; Miles & Huberman, 1994; Patton, 2014). Questions could arise during the conversations on the research topic and said questions would be duplicated throughout each interview to allow for consistency. Second is the guided interview process that outlines the discussion areas to focus the interview questions (Creswell, 2014; Miles & Huberman, 1994; Patton, 2014). In the third method of standardized open ended interviews, I prepared every participant's exact words and

sequence in the same order, and the interpretation reflects each person's response in the data analysis (Patton, 2014). The fourth method (Patton, 2014) discussed is the closed, fixed response interview, which has both the questions and answers categorized in advance, making the analysis simple, comparable, and easily aggregated.

The instrumentation for this research was the semi structured, open ended, and interview guided approach. The interviews of the 12 Nigerian men living in New York City were individual and in person (face to face). I used an audiotape to record the participants' responses after they signed informed consent. During the interview, I observed participants' reactions to the questions and voice tone, which would have led to considering whether to stop the conversation and refer the participant to the psychologist or appropriate authority had it been necessary.

The use of an interview guide (Appendix A) was to include detailed questions, elaborate and clarify probes to enhance the clarity of statements as intended. The use of the semi structured, open ended interview assured that the participants were asked the same questions, in the same way, to provide uniformity not only in the data collection process but also to improve the uniformity of the data collected (Farina, 2014 & DeShong, 2013). Everyone's experiences are different. Thus, I did not expect uniformity in the results. The goal was to ensure the process was homogenous and focused on receiving appropriate answers to the research questions.

Open ended questions facilitated the semi structured approach's aims because participants could focus on answers in areas they chose and were not led by me. They chose the information they felt was pertinent to their situation and understanding through

their words, the order, and nonverbal cues they expressed at the interview (Farina, 2014; DeShong, 2013). In more ways than one, open-ended questions guaranteed the authenticity of the responses and revealed the participants' actual experiences (Sargeant, 2012). Maxwell (2013) suggested that leading questions could accomplish the exact opposite, where the perspectives highlighted are those of the researcher rather than the participant. Sargeant (2012) added that while the researcher's voice is essential, consistent with the phenomenological qualitative method, the participants' experiences and representatives matter most. Hence, open ended questions are more useful to this end.

The semi structured interview is used widely in qualitative research (Creswell, 2013; Green & Thorogood, 2014; Miles et al. 1994; Patton, 2014). In combination with the interview guide, semi structured questions guided the participants and me to focus on the research topic and allow readers to examine and evaluate the instrumentation (Green & Thorogood, 2014). The respondents also were able to answer the same questions. Patton (2014) suggested that these data collection methods are appropriate for questions seeking answers on knowledge, cognitive, and interpretive processes. This research sought the knowledge, understanding, and experiences on IPV of Nigerian men living in New York City. Thus, these data collection methods were appropriate for the research.

Pilot Study

Green and Thorogood (2014) described a pilot study, also known as a preliminary study, as a pretest for a chosen research instrument, such as a questionnaire or the interview guide used in this research. A pilot study precedes conducting the principal research (Green & Thorogood, 2014). Green and Thorogood asserted that the aim of the

pilot study is to assess if the participants understand the questions, and it identifies potential practical problems before starting the actual research. Green and Thorogood postulated that the pilot study applies in almost all research designs: quantitative, qualitative, and mixed method. The interview questions were new and started with the men's understanding of IPV before immigrating to the United States. The questions progressed to if and how understanding the Nigerian men's IPV experience might have changed since living in the United States.

Some of the reasons for conducting a pilot study included what I was looking to accomplish using the semi structured interview guide (Green & Thorogood, 2014). I expected the pilot interview to answer the research questions and provide the information correctly. The goal was to administer the interview questions and get feedback on whether the questions were ambiguous and/or challenging. The pilot study's additional aim was to determine whether the questions were appropriate, and the length of the interview was reasonable, and established an interpretation of the replies that informed the research or led to the revision of the instrument were it necessary. The steps included interviewing three Nigerian men living in New York City, similar to the primary research participants.

Procedures for Recruitment, Participation and Data Collection

To avoid recruiting people I had a personal relationship with, I distributed the flyers (Appendix B) at workplaces such as hospitals, schools, African churches and mosques, and African Market stores (in Brooklyn, Queens, Bronx, Staten, and Long Islands). I distributed flyers to some Nigerian organizations in New York City, such as

the World Igbo Congress and similar groups within other ethnic groups such as the

Yoruba and Hausa ethnic groups. I also sent flyers (Appendix B) out to potential

participants individually via email and approached people one on one, including through

phone calls, and sent emails to individuals identified through snowball sampling.

I contacted potential participants only when they reached out to me by phone or

email and prepared to answer any questions. I then provided them with an overview of

the research. It was explained to them that participation in the research was voluntary and

that they could opt out anytime during the research. They received information on the

screening tool (Appendix C) to ensure that they meet the research's inclusion criteria. I

used the acculturation measurement instrument Vancouver Index of Acculturation (VIA)

to score the participants' acculturation level. The mainstream sub score was the mean of

the even numbered items and the odd numbered items for the heritage sub score. That

included explaining that they would be giving their demographics for easy identification,

particularly during data analysis, to report their responses according to age, education

level, and how long they resided in the United States. No one that did not meet the

criteria was recruited to participate in the research. I introduced the nature of the project

to the participants on a one to one basis. During the face to face interview, they also

received the informed consent form and reviewed/signed it before the interview session.

As stated previously, to avoid undue influence, there was no family member, professional

colleague, or friend recruited to participate in the research.

I conducted the interviews in a nearby library that the participants chose (with

approval). This data collection procedure was a semi structured, open ended, and face to

face interview of 12 Nigerian born men living in New York City that participated in the research. The research interview aimed to explore the prior and current underlying structures of the participants' beliefs to understand the IPV phenomenon (Green & Thorogood, 2014). The semi structured, open ended interview helped ensure the participants were asked the same questions in the same way. An additional aim was to gather in depth information regarding IPV experience before and since immigrating to the United States. The interview schedule revolved around participants' availability and fit within the allotted data collection period for this research. Each participant was interviewed once, and the interview time ran between fifteen minutes to an hour and a half. A follow up phone call was only for follow up questions, clarity, or checking the reliability of data.

The techniques for recording the interviews were note taking and audiotape recording. I ensured the interview process did not intrude the flow of the participants' schedule the day of the interview. The interview session was structured to include the introduction of myself, the purpose, procedure, benefits, and potential risks of the research (Green & Thorogood, 2014). I reviewed the content of the consent with the participants before the meeting. Informed consent (Appendix D) was then obtained from them on the interview day before starting to interview and using the audio recording. I informed the participants that their information would be confidential. I also told each participant that he could withdraw from the research at any point in time by calling the number I provided to them, but that I would retain the data if such participant withdrew after the data collection or analysis (Green &Thorogood, 2014). Considering the

recording devices' integrity is essential, I ensured that the audio recording device was working (Green & Thorogood, 2014).

Participants had time to share anything else that was on their minds on IPV. The audiotape was on to put the participants on record for their responses. I took notes intermittently during the interview to ensure that if the audio recorder was functioning correctly at any time through the interview process, I would use the notes to fill in any gaps or add comments. One interview lasted for about fifteen minutes to one hour, thirty minutes. I returned to the respondents to validate their responses, which allowed them to follow up and improve the accuracy, credibility, validity, and applicability of this research.

Asking warm up questions such as how are you or how was your day first helped the participants feel comfortable. After that, I used the interview guide to focus on more focused questions, allowing dialogue (Bourgeault et al., 2013). The participants were asked a follow up question to avoid repeating the interview questions rather than interrupt when a participant was speaking during the interview or gave an answer related to a question (Bourgeault et al., 2013). The conversations remained on the main domains, avoiding tangents to be able to complete the interview within the time frame of between 15 minutes to 1 1/2 hours; and this also allowed for full focus on answering the research questions and what the participant was interested in sharing (Bourgeault et al.,2013).

Several factors determined when to leave the field. One example is when the data collected sufficiently answers preexisting or new propositions or renders an accurate description of the phenomenon under research with high fidelity to the research questions

(Morrison, Gregory & Thibodeau, 2012). I could have also ended the research if I determined that the research agenda or phenomenon under research was no longer as problematic or interesting (Morrison et al., 2012). Another time the research could have ended was if completing the research depended on my judgment that the participants understood the phenomenon under research (Morrison et al., 2012). Researchers sometimes end the research because of institutional constraints, lack of available resources, researcher exhaustion, and the pressure of funding that prevents the ability to meet deadlines (Morrison et al., 2012). It is essential to prepare the participants for this possibility from the beginning because some participants might engage in the research lightly, while others might be interested in the outcome (Morrison et al., 2012).

I communicated to the participants that this research could end earlier than intended if I discovered that the same themes were recurring during data collection and analysis, and no new insights emerged with additional interviews (Fusch & Ness, 2015). This research also could have ended earlier than intended if I determined That I reached the research process's conclusion with the participants (Morrison et al., 2012). This research ended with member checking, and the participants knew from the beginning. Thus, this research did not end prematurely. Instead, it came to a sound conclusion that depended on the judgment that I obtained all relevant information to make a detailed analysis of the research problem. Participants in this research did not experience harm (emotional, physical, and spiritual consequences). There was no need to declare an exit strategy (Morrison et al., 2012). I engaged the participants in meaningful dialogue around closure on the study initially and throughout the study (Morrison et al., 2012). After each

interview, I thanked the participants for taking time out of their busy schedule to participate in the study. The research ended with Walden's acceptance of the research findings after member checking, and I informed the participants of that fact.

IPV is a sensitive topic that could potentially trigger significant emotional, physical, and spiritual consequences for the individuals involved in the research process (Morrison et al., 2012). Before the research could proceed, I instructed the participants that they could withdraw from the study should they experience any emotional, physical, and spiritual disturbance with the interview, such as episodes of insomnia and nightmares that they cannot handle or speak with a psychologist of their choosing (Morrison et al., 2012). If they did not know any psychologist they could talk with, I could have provided one for them.

The participants also received the instruction that they may or may not provide the reason(s) for leaving the study (Borgeault et al., 2013). Participants in this research received instructions to contact me with any questions or concerns that arose after completing the interview or at any time before the end of the research that could have led to their withdrawal (Borgeault et al., 2013). The fact that this research involved the collection of personal information had a participant withdrew from the research, he would have been asked if he will allow the continued use of her/his information if necessary and may need to put that in writing if he wishes (Borgeault et al., 2013). None of the participants withdrew from the research.

Data Analysis and Interpretation Plan

I used the open coding method to analyze the interview data collected in this research. Miles et al. (1994) described data analysis as an inductive means of interpreting qualitative data to determine meaningful and useful information by organizing it into themes or categories. Patton (2014) described developing some easy classifications or coding schemes as the first step of the analysis and classifying qualitative data as making the analyzing and interpretation process less chaotic. In qualitative phenomenological research, the data's primary patterns are identified, coded, categorized, classified, and labeled. Patton (2014) opined that the analytical process principle is the same for manual and computer software assisted coding. This research adopted the manual coding process.

Patton (2014), Maxwell (2013), and Miles et al. (1994) all agreed that organizing material into codes and categories starts with finding what things fit together that further reveals patterns. These patterns are common among participants that usually develop from data gathered from responses to individual questions. They are then assorted into categories using internal and external heterogeneity (Maxwell 2013; Miles et al. 1994; Patton 2015). The data that belong together should, to some extent, hold together or jointly in a meaningful way, and the differences bold and clear (Maxwell 2013; Miles et al. 1994; Patton 2015). Patton (2014), Maxwell (2013), and Miles et al. (1994) also agreed that where there is overlapping or many unassignable data points, it may be evidence of a flawed category system.

Qualitative phenomenological research seeks to create meaning from participants' experience through space and time (Davis, D'Odorico, Laio, & Ridolfi, 2013). That

means an in depth examination of each participant's interview transcript to identify the reality of IPV experienced by Nigerian men in Nigeria and New York City. I used quotes and themes identified in participants' responses to provide evidence of the individual participants' different perspectives. I described in detail the context of the research, logically related steps.

Following the data collected through phenomenological semi structured, open ended interviews, I reduced the transcripts to identify significant statements and phrases and aggregated and used them to formulate meanings categorized into clusters of themes (Shosha, n. d). The analytical process also included describing the phenomenon exhaustively using all ideas presented. Applying Miles et al. (1994) suggestions on open coding, this qualitative data analysis drew all the interpretations or conclusions from the raw data collected as part of the research to provide explanations, understandings, and IPV interpretations among Nigerian men living in New York City.

This qualitative phenomenological research analysis also utilized rich texture requiring a systematic process for coding the data (Creswell, 2013). To satisfy that and the feeling for raw data that the inductive analytical approach demands, the hand coding was done by first reading each participant's descriptive statements on IPV with attention to their experience and method of experience and extracted relevant information from the transcript regarding the research question (Sageant, 2012). The analysis proceeded with formulating meaning from what Nigerian men living in New York City understand about IPV now, make themes from those meanings, and grouped similar themes into clusters and then into theme categories (Sageant, 2012).

I returned to each participant and presented my findings to validate the steps and ask about the results. Green and Thorogood (2014) explained that respondents validate research when the researcher shows them the results to verify, including their accounts and the techniques used to correspond with those of the research subjects.

Reflexivity notes were available as one of the strategies for bracketing in this research. The literature I reviewed, including Yüksel and Yıldırım (2015), argued that bracketing is the starting point of the phenomenological data analysis. Patton (2014) described bracketing as the suspension of the researcher's subjectivity, referring to preconceptions, presumptions, or opinions throughout the research. Creswell (2013) added reflexivity as the key that helps determine the potential influence of the researcher's preconceptions on the research process.

Chan, Fung, and Chien (2013) argued that developing strategies for bracketing should apply not only to the data collection and analysis phases but applied throughout the research process, including the literature review process. The process for this research started with the literature review. The search's emphasis was on anything related to IPV, domestic violence, and domestic violence policy. Other areas of the search included migration, IPV experience, and Nigeria. They were then linked to the data collection and analysis sequentially.

In the data analysis, I looked for how the men characterized Nigerian and American culture's influence on their understanding of IPV and the difference between the two societies. Gialdino (2009) characterized violence as irrationality that comes from insinuating circumstances such as stress, culture change, immigration status,

acculturation, and gender and provider role reversal. Gialdino's model suggested that the causes of violence could be cultural, social, lack of education and opportunity, poverty, and discrimination. During the analysis, I looked for the influence circumstances such as stress, culture change, immigration status, acculturation, gender, provider role reversal, cultural, social, lack of education and opportunity, poverty, might have on IPV perpetration and/or prevention.

Issues of Trustworthiness

Creswell (2014) referred to trustworthiness or validity strategies as measures researchers use to check their data's quality and usefulness and gain their readers' trust. The suggestions by Creswell (2014) and Patton (2014) included that these measures help the researcher demonstrate the rigor of the qualitative research, check data collection to minimize bias, maximize accuracy, and verify the rigor of qualitative research and confirm the accuracy of the findings. The actions required that I report the inquiry results accurately and impartially without bias while acknowledging that some subjectivity and judgment may enter (Creswell, 2014; Patton, 2014). These measures are necessary for qualitative research due to the questions positivists often pose, perhaps because of the difference in ways they address their concepts of validity and reliability from naturalistic work (Stevens (2013). All the literature reviewed, including Patton (2014), posited that qualitative research's validity strategies include credibility, dependability, transferability, and confirmability, each described below.

Credibility. Credibility dealt with whether the interview questions yielded answers for the intended study, and that such findings were in line with reality about the

phenomenon (Creswell, 2014 & Patton, 2014). The established strategies for the

research's credibility included the previously described pilot study that showed the

interview questions (instrument) adequately sought and provided the answers to the

questions the research pursued. Another strategy used was triangulation, which involved

using the information from one participant described and comparing the responses to the

same question with the other participants (Stevens, 2013). As Creswell (2014) and Patton

(2014) suggested, the intent was to verify individuals' viewpoints and experiences against

others to construct a detailed description of the participants' understanding, attitudes,

needs, or behaviors based on their range of contributions. The diversity of participants

that is, Nigerian men of different ages and different tribes, added to its credibility.

Creswell (2014), Green and Thorogood (2014), Maxwell (2013), and Patton (2014)

considered triangulation as the use of other data sources to capture and report multiple

perspectives rather than seek a singular truth.

Creswell (2014), Patton (2014), Green and Thorogood (2014), and Maxwell

(2013), considered the single most essential provision that a qualitative researcher can

make to bolster a study's credibility, member checking, was also used. I went back to the

participant to verify their information (Creswell, 2014; Patton, 2014). The peer review

debriefing involved a review of this study by the dissertation committee chair and the

member(s).To add to the study's accuracy, they reviewed and asked questions about the

research (Creswell, 2014; Green & Thorogood, 2014; Maxwell, 2013; Patton 2014). As a

nurse and a Nigerian, I have the background, qualifications, and experience relevant to

the phenomenon, which Creswell and Patton described as particularly vital in adding

credibility to qualitative research. Creswell and Patton surmised that the researcher is

part of the principal instrument of data collection and analysis and can render

professional judgment in the data collection process to authenticate the information

received. The analytic process equally included using reflective commentary to remark

on how my background helped shape the findings' interpretation, as Creswell and Patton

suggested.

Dependability. Dependability addressed the reliability in this research by

specifying the conceptual framework explicitly related to the theory and my (the

researcher's) role, and the sites' layout, like Miles, Huberman and Saldaña (1994)

suggested. Sections were devoted to the research design and its implementation, the plan,

and execution on a strategic level to allow readers to assess how the I (researcher)

followed proper qualitative research practices (Creswell, 2013; Miles, Huberman &

Saldaña, 1994; Patton, 2014)—adhering to Creswell's (2013) tenets of phenomenological

transferability strategy. The report also included data gathering in detail and a reflective

appraisal of the project that described the effectiveness of the inquiry process.

Transferability. The value of qualitative research is the unique perspective of

each research (Creswell, 2014). As Creswell (2013), Patton (2015), Maxwell (2013), and

Miles et al. (1994) inferred, transferability or external validity refers to the extent to

which findings of one study can apply to other situations, particularly a wider population.

As in many naturalistic inquiries, this stud''s generalization is not possible because its

number is small (Creswell, 2013). Therefore, the findings are unique to this limited

number of individuals and a particular population, but the research may still serve as a prototype model for another research if there is a shortfall after the reader assesses the extent to which I followed proper research practices (Creswell, 2013; Patton, 2015). This dissertation is detailed, whereby there could be a repeat of the future work if not necessarily to gain the same results (Creswell, 2014: 204).

Confirmability. Confirmability, in this qualitative research, was the degree to which the outcomes or results could be confirmed or corroborated by other people (Creswell, 2014; Stevens, 2014). To facilitate the validation of these research findings, I ensured objectivity, starting with the pilot study and checked on transcripts to eliminate apparent mistakes during transcription. Defining the meaning of specific codes was done by comparing data consistently with the codes and writing memos about codes throughout the research process, as Creswell (2014) suggested, which was helpful to confirmability. I also cross-checked codes developed from one participant to another to ensure consistent data collected (Creswell, 2014). The use of triangulation tended to reduce the my bias and the admission of the my beliefs and assumptions (Creswell 2014; Stevens 2014). Shortcomings are inevitable, but I recognized and reconciled them in the research methods, and their potential effects are also significant (Creswell, 2014). As Creswell asserted, there was also a step by step and in depth methodological description to scrutinize research results' integrity.

Validity: Validity determines the credibility/trustworthiness of research by analyzing whether the research instrument indeed measured that which it was intended to

measure or met the research objective (Creswell, 2014). In other words, validity validates the truthfulness of the research results. The use of validity is considered primarily in quantitative research because of its positivist roots or perspective, but it is now used in the qualitative research paradigm (Patton, 2014; Bourgeault et al., 2013). In qualitative research, the validity is grounded in the rigor or processes and intentions of research methodologies and projects (Patton, 2014). Thus, I used a semi structured interview to gather the data for this research.

A tape recorder was used during the interview to capture the participants' responses to the questions. The discussion was to last between 45 mins to one hour, fifteen minutes, but it lasted between 15 minutes to one and a half hours. I reviewed notes when necessary for any gaps or to add comments and returned to the respondents after transcription to validate their responses. That gave rise to the opportunity of following up and helped improve the accuracy, credibility, validity, and applicability of this research. The method of analyzing the interview data collected was the open coding method. I followed Miles and Huberman's (1994) open coding on data analysis that requires an inductive interpretation of qualitative data to deduce meaningful and useful information by organizing the data into themes or categories. As Berger (2015) suggested, I wrote down ideas that could have constituted bias in a notebook to ensure findings reflected only the participants' experiences and answers during the interview

Ethical Procedure

A researcher does not conduct proper research without maintaining the study's integrity, including respecting the participants' rights and doing them no harm (Green &

Thorogood, 2014). Pozgar (2013) described ethics as comprising morality, codes of conduct, and moral judgments. Pozgar added that despite ethical relativism (cultural norms about right or wrong), ethical principles are universal and hold as rules of conduct that provide policy and procedure guidelines that identify valuable actions and intentions in the society or professional discipline. Ethics in research deals with the interaction between the researcher, individual(s), and community or the environment under study (Waycott et al. 2015). Ethical guidelines reflect the history of abuses and mistakes made during biomedical research (NIH, 2012). Research ethics demand from researchers respect for person, beneficence, and justice (NIH, 2012).

The two basic ideas behind the principle of respect for persons include treating individuals as autonomous agents and providing additional protections for diminished autonomy (Waycott et al., 2015). Beneficence implies two general rules of expressing actions during research: to maximize possible benefits while minimizing potential harms (NIH, 2012; Rudestam & Newton, 2015). Justice is accomplished in research when a researcher distributes the burdens and benefits of research fairly among individuals, groups, and societies (Stevens, 2013). In other words, the researcher has an obligation to the participants, community (in the form of social change), and the professional discipline. Rudestam & Newton (2015) noted that researchers owe it to their discipline to design research generally to develop or contribute to the body of knowledge. This research contributes to the knowledge base of IPV among Nigerian men living in the United States, among health scientists in general and public health administrators.

Pozgar (2015) posited that on an institutional level, the ethics committee or institutional review board (IRB) provides the ethical guidelines to assist organizations and individuals in resolving ethical dilemmas and promoting human subjects' rights and safety during research. Rudestam and Newton (2015) specified the useful distinction between procedural ethics requirements and ethics in practice described as the day to day ethical issues in research. According to Rudestam and Newton, the researcher must consider the ethical principle of respect for participating in research to include obtaining informed consent. The researcher should also allow individuals to decide whether to participate in research or absorb any potential risk. Not doing that is considered disrespectful (Rudestam & Newton, 2015). The consideration for gaining access to potential participants or data for this research started with applying to the Walden IRB to recruit participants. Approval from IRB is essential, particularly in qualitative studies considering qualitative researchers face ethical challenges in all stages of the research, from design to reporting, due to the personal interaction between the researcher and participants. I worked with the Walden University institution review board (IRB) to agree on mutually agreeable solutions to protect the participants and the integrity of the process.

Part of recruitment and ethical strategy throughout this research was respect for the participants and maintaining their privacy. No one who participated in this research was pressured into participating or decided to withdraw. Had anyone chosen to withdraw from the study, he would not have faced any penalties. The participants signed a consent form before data collection began. Creswell (2014) explained that informed consent

involves individuals choosing whether to participate in research or not and signing a form that properly informs them of their involvement before engaging in the research. The signed form acknowledges that the researcher would protect the participants' rights and safety during data collection (Creswell, 2014). Participants received the instruction that they could consent to the study at the beginning of the interview. Waycott et al. (2015) advised making informed consent a process rather than a onetime event. After the participants signed the consent form, I explained the purpose and the procedures for the research. That included pointing out the benefit and potential risks associated with the research; ensuring information shared was unbiased, balanced, accurate, and free of misleading statements. I was honest and assured the participants that there was no deceit in any way about the purpose and procedures of the research (Stevens, 2013). As stated previously, providing full disclosure of each aspect of this research phase, each factor helped to enhance the process's integrity.

The participants received an explanation of the potential benefits of the research to them and the Nigerian community but avoided giving assurances and false hopes. With the information regarding the possible use of the information to benefit the Nigerian community, I reassured the participants that their information would remain confidential. I informed the participants of my mandatory reporter status. That is, although information shared with me was confidential, if the data revealed that anyone mentioned during the interview was experiencing violence or the perpetrator of violence in their relationship, I had a responsibility to inform the police of such or refer the victim to appropriate social

services (NIH, 2012). The report does not reveal their identity. Instead, they took on Mr. A to L as their identifiers.

All the participants' information remains confidential and stored in encrypted electronic devices to which only I have the password and access to the data (storage, procedures, and dissemination). I followed Miles et al. (1994) recommendation of having a single folder for each participant where all individuals' data went in and the original and complete information in a separate backup file. When not in use, paper documents such as consent forms or printouts that contain participants' personal information were in a locked file cabinet, and I alone handled the information. A restriction Login ID is on my computer with a lockout function for the screen saver. Miles et al. (1994) asserted that the ethical plan extends to the ultimate destruction of data after completing the project. At Walden University, the recommendation is to destroy data after five years. At the time, there will be shredding of paper documents and deletion of electronic files on digital devices such as memory drives, PCs, laptops, and file servers permanently as regulation requires. Walden University's ethical standard by which this research will abide is to destroy research material after five years.

Summary

Conducting and making sense of qualitative phenomenological research requires gathering qualitative evidence and using a data collection process that extends beyond a single conversation, record, or observations (Creswell, 2014; Patton, 2014). The overall orientation to developing this qualitative phenomenological research was choosing the best technique to generate the best result for the study (Creswell, 2014; Maxwell, 2014;

Patton, 2014). This research process evolved from asking a question or framing a concept to 1) examining existing literature on the topic, 2) formulating a conceptual framework against an assumption (design), and 3) conducting research, drawing conclusions, and reporting on the findings (Creswell, 2014; Maxwell, 2014; Patton, 2014). At the beginning of the process, my philosophical positions and interpretative frameworks informed the procedures. Next, I chose a research approach, designed the instrumentation for data collection, analyzed the data, and the audience to whom the reports will be pertinent and consequently disseminated.

The project's scope was determined while developing the research question, which determined the research method chosen. In qualitative and quantitative methods, defining the sample size and collecting data are essential parts of empirical research. This chapter covered all the elements mentioned to various degrees, depending on their relevance to this section. To an extent, this chapter presented a research design and methodology for gathering qualitative evidence.

Relevant to phenomenological research and described in this chapter was how to develop and test a data collection tool to include questions I addressed with what I know (through the literature review) (Creswell, 2014; Patton, 2014). Other determinations included the sample size and instrumentation utilized to gather the data like face to face interviews and data collection techniques that the other data collection tools could not give (Creswell, 2014; Patton, 2014). Inclusive also was the determination of location and setting for the data collection, and in cases of interviews, how long the session lasted, how many sessions produced adequate data for the study, and the resources for the

method of data collection. I also determined whether the data collection process matched

the time of the inquiry and reflective questions/reflexivity as a method of testing or a

means by which I examined whether looking back, I reflected on how the data was

collected (Maxwell, 2013). Among those reflective questions were whether there is a

reflection that research conducted was biased and analyzed from the participants'

viewpoints and not mine. What other questions could I have asked that would have made

the study description more complete? Was the sample size appropriate for the research?

Was the qualitative phenomenological design appropriate for this research because it

asked these questions and presented an effective means of finding out the experience of

IPV of Nigerian men living in New York.

Chapter 4: Data Analysis and Results

Introduction

This study aimed to explore the IPV experiences of Nigerian men living in New York City. The research question was as follows: What are the experiences of Nigerian born men currently living in New York City regarding IPV? The research question was answered through a phenomenological approach.

This chapter reviews the pilot study, setting, demographics, data collection, data analysis, assigned labels to research questions, evidence of trustworthiness, and results of the data collected. I also presented the analysis of the data collected for this research through a semi structured face to face interview. After the data collection, a transcription company transcribed the recorded interviews into a word document. I then reviewed the participants' responses, coded the transcripts, and extracted themes from the codes. The themes represent topic areas that I gleaned from the qualitative interviews conducted for the study. The synthesis of themes emerged from relating the themes to each other to create a broader account of IPV perceptions and understandings experienced by a purposive sample of Nigerian men living in New York City.

Before presenting the themes, note that none of the sample men reported either committing IPV themselves or being victims of IPV. Therefore, participants' narratives did not illuminate the question of what it might feel like to experience IPV as either the originator or the recipient of IPV. Therefore, the perpetrator's perspective was missing from the narratives. I could not, therefore, address that in data analysis. Instead, the participants commented on IPV as a phenomenon that they had either directly

observed in others or knew to exist in Nigerian society. The findings of this study can, therefore, be understood in terms of descriptive phenomenology, which is one of the subtypes of phenomenology recognized in the methodological literature (Agüero Caro, 2013; Cilesiz, 2011; Frenkel, 2008; Husserl, 1970; Jamjoom, 2010; Moustakas, 2016; Paul, 2015; Pettigrew, 2015; Spiegelberg, 1982). According to Englander (2012), in the methodological approach of descriptive phenomenology, "The phenomenon is the object of investigation, not the person, although obviously, a person is required to describe the phenomenon" (p. 25). Therefore, in descriptive phenomenology, the goal is to discover the meaning of a phenomenon such as IPV (Englander, 2012, pp. 16-17), which is also the case in the data analysis presented below.

This research data was from 12 Nigerian born men living in New York City ages 30 to 60 years who experienced (witnessed) IPV. My general approach to this research was to develop a greater understanding of acculturation's influence on IPV knowledge. The research design included a series of up to 1 hour audiotaped face to face interviews of the participants. IPV can happen against men and women, but this research was focused explicitly on IPV perpetrated by men against women because research has shown that it is more common for IPV to be perpetrated by men against women, particularly in ethnic communities (Adogu et al., 2015).

Pilot Study

There was a pilot study conducted for this research before doing the principal research. According to Patton (2014), a pretest for a chosen research instrument, such as a questionnaire or the interview guide, is essential if the interview questions are new. The

aim is to assess the participants' understanding of the interview questions, and if it

identifies potential practical problems before starting the actual research (Patton, 2014).

Green and Thorogood (2014) further asserted that the pilot study applies in almost all the

research designs: quantitative, qualitative, and mixed method.

Setting

The sensitive nature of IPV requires a private setting for discussion. Therefore,

the study setting, including all data collection, was in a closed room of various libraries in

three boroughs of New York City: Brooklyn, Queens, and the Bronx. Although the study

setting was New York City, participants shared aspects of their IPV experiences in

Nigeria. Nigeria was not the study's physical setting, but it is considered an influence on

the study's setting. No unusual personal or organizational conditions appeared to

influence participants. No other characteristics of note distinguished the setting.

Because IPV's sensitive nature could trigger significant emotional, physical, and

spiritual consequences for the participants, such as episodes of insomnia and nightmares,

which I made participants aware of these risks ahead of time, I had information for IPV

support services available to give to the participant, had the need arises. I would have

discontinued the interview if there was evidence of an ongoing abuse triggered by the

interview questions or if the evidence emerged after the interview concluded and reported

the abuse to the appropriate authorities.

I also explained to the participants that the information shared with me was

confidential. However, ethically, I would have informed the police or refer the victim to

appropriate social services if the data revealed that anyone mentioned during the

interview was presently experiencing, or the perpetrator of violence in their relationship.

Demographics

Participants in this research were 12 Nigerian born men ages 30 to 60 years who

have lived in the United States for five years or more and became acculturated to

American society. They witnessed/experienced a woman being a victim of IPV in Nigeria

and/or the United States and spoke, wrote, and understood English. The demographic

data of each of the participants are provided in Table 1. To preserve privacy, I assigned

participants letters A to L.

Table 1

Participant Demographics

Participant	Age (years)	Level of education	Length of stay in the United States	Level of acculturation
A	49	Master's degree	9 years	Moderate
B	56	Master's degree	23 years	Moderate
C	47	Bachelor's degree	9 years	Moderate
D	54	Bachelor's degree	15 years	Moderate
E	55	DNP candidate	24 years	Moderate
F	60	Master's degree	23 years	Moderate
G	46	BA/BS (Medical Doctor)	16 years	High
H	46	Master's degree	15 years	Moderate
I	57	Associate degree	14 years	Moderate
J	59	BA	30 years	High
K	60	Bachelor's degree	35 years	Moderate
L	46	Master's degree	16 years	Low

Data Collection

As phenomenological qualitative research, this data collection was from 12 Nigerian men living in New York City to construct the multiple realities of IPV from when they lived in Nigeria and moving to the United States. The aim was to determine what Nigerian men living in New York City understood about IPV either from social relationships or experience and their ability to provide a comprehensive description of the phenomenon.

The data collection tool included standardized semi structured interview questions comprising a series of open ended questions designed to elicit an understanding of IPV by Nigerian men living in New York from City before and since arriving in the United States. The interviews were face to face. I audiotaped it and took notes as well. The sessions were informal and interactive. In this phenomenological research, the central question was: What are the experiences of Nigerian born men regarding IPV perpetration while living in New York City and Nigeria? The participants provided their demographic characteristics, such as their age, educational level, years of stay in the United States, and IPV experience.

Each of the 12 Nigerian born men living in New York City who participated in this research contributed data to the research. Quotes from participants are in the body of the data analysis. The only data collection instrument in the study was the semi structured interview protocol, which I used to conduct the interviews. The audiotaped interview was sent to a transcription company for transcribing. Each participant's interview times ranged from 15 minutes to one hour, thirty minutes.

There were no variations noted in data collection from the plan presented in Chapter 3. The research design was the qualitative phenomenological research method, which fits the tradition of exploring and understanding human behavior in or perception of their immediate environment. The study design also fits with when there is a need to gain an understanding of any phenomenon (i.e., an occurrence or an observed event), such as IPV among Nigerian men living in New York City (Bourgeault et al. , 2013; Creswell, 2013, 2014; Patton, 2002, 2014). There were no unusual circumstances encountered in data collection. None of the data provided by the participants was incomprehensible in the recording or the process of transcription. There were 14 interview questions used to collect data. The first interview question was: "Could you tell me what you understand by the term IPV?" From that question emerged, answers such as violence against a partner, the man's superior attitude over the woman, physical or psychological abuses, and a partner's physical and verbal abuse. Some other answers included emotional abuse by a partner and a husband's use of violence as a chastisement tool over his wife. Nigerian culture accepts a husband using violence as a chastisement tool over his wife (Participant H). There were also such answers as sexual or economic abuse in a closed relationship, verbal abuse, and jealousy from the husband or cowives.

The questions that followed focused on ascertaining the participant's understanding of:

- The causes of IPV both in the family unit and the Nigerian community at large.

- Effects of IPV on victims and their family members

- Effect of IPV on the community at large

- From whom IPV victims seek help in Nigeria

- Understanding of IPV since arriving in the United States

- How the Nigerian community in New York City can prevent IPV among them

These questions aimed to determine whether the participants have a different understanding of IPV since living in the United States.

Data Analysis

There is a wide range of methods to approach the descriptive examination. Analyzing the interview data collected for this research was the open coding method and the systematic process for coding data (Creswell, 2013). Miles et al. (1994) described the open coding method of data analysis as inductive and a means of interpreting qualitative data to determine how meaningful and useful the information is by organizing it into themes or categories.

After receiving the transcripts from the transcription company, I read through the interview data (responses) to understand the data (Creswell, 2014). I read each participants' narratives three times: first was when I first received the transcripts. The second was when I played back the recordings as I read the transcripts and a third time was when I played back the tapes while verifying the participants' responses. Repeated exposure to the narratives was an essential component of the data analysis process, as each story's details became increasingly familiar (Saldaña, 2016).

The next step in the process was to create initial codes by marking passages of text with a code label to retrieve the data later for further analysis quickly. Hand coding

made it easier to compare, analyze, and identify patterns for future research. According to Saldaña (2008), a hand code in qualitative research symbolizes a word or short phrase based on visual or verbal data. Coding decreases much information into little pieces of significance (Saldaña, 2008). There are various approaches to coding, and the strategy usually is controlled by research questions. Given this, I coded each portion of the information pertinent to or caught something fascinating relating to the research question utilizing line by line coding. I used open coding, which implies there were no preset codes, creating and adjusting the codes as I worked through the coding procedure (Shosha, n. d). Coding this research was not a one time, linear event.

Second cycle coding was necessary for this research to reorganize and reanalyze data coded in the first cycle coding. Saldaña (2016, p. 234) said that "the primary goal during second cycle coding is to develop a sense of categorical, thematic, conceptual, and/or theoretical organization from your array of first cycle codes." In developing the themes for the research, codes may change. There could be additional or new codes or drop codes all together (Saldaña, 2016).

Saldaña (2016) shared six different types of second cycle coding methods: Pattern, Focused, Axial, Theoretical, Elaborative, and Longitudinal. The Coding utilized for this research was Focused Coding. Focused Coding is also known as selective Coding and intermediate Coding. According to Saldaña (2016), Focused Coding searches for the most frequent or significant codes to develop the most salient categories in the data corpus…. (p. 240).

The interview questions guided the sorting of categories. After the first cycle coding, I grouped the identified data bits into subcategories by manually arranging them on separate sheets of paper according to participants' exact words, resulting in rich data for the research. I did it manually because I thought it beneficial to have gone through the process manually to enable quick location and tracking of the interview information within the original interview. Next, I took the pages of categorized data bits, created a new file of each interview without messing with the original data, and added the category coding to the data bits in the new folder to search for themes. The choice for descriptive coding for categories is to explain each category. It is also because multilevel categories required a way of keeping track of the levels. Categories and themes provided an easy way to accomplish this (see Table 2).

Following the line by line coding (collection of codes), I started to put similar codes into the same categories and move them around to determine how that reflects my analysis the best. By analyzing and sorting the codes into categories, I detected consistent and overarching themes for the data reflected in the results.

Table 2

Developing the Themes

	Codes	Categories	Themes
1	Violence against partner Superiority claim by the man over the woman Physical, psychological, emotional and verbal abuse of a partner Husband using violence as a chastisement tool during his wife. Nigerian culture of acceptance of a husband using violence as a chastisement tool during his wife. Sexual or economic abuse that occurs in a closed relationship Jealousy from the husband or cowives	Understanding of IPV in Nigeria	Machismo Emotional aberration
2	Husband beats wife Husband hitting his wife for daring to refuse him sex, extorting money from the woman A man that always claimed he's right A man isolating his wife from family members, friends and well wishers A man beating on his woman	Partner violence situation	Machismo Emotional aberration
3	Lack of mutual respect, No true love, Misunderstanding Superiority claim of Nigerian men during their women, polygamy Fight during money, sex, and anger, lack of trust, a woman denying her husband sex, unresolved conflict, ineffective communication Alcoholism, feeling of inferiority complex by the man, men's superiority mentality Cultural belief that men are superior during women, community's belief that a woman should not separate from the husband The cultural norm of men beating their wives, men refusing to see relationships from women's	Causes of IPV	Machismo Emotional aberration

Table continues

	perspectives, frustration, Nigerian culture considers IPV normal, and women as second-hand citizens. Infidelity, man extorting money from the woman or denying her money for family or personal upkeep, lack of transparency, cultural norm A shift in financial resources from the man to the woman, Perceived disrespect of the man by the woman, unemployment Control during family finance, Anger, lack of empathy, a man's claim of the woman as his property, Polygamy, Jealousy from husband or co-wives, childlessness, the culture of not displaying affection, religious beliefs Infidelity, poverty, neighborhood, unemployment, cycle of violence		
4	Bodily injuries such as cuts and bruises and pains Loss of pregnancy, Emotional and mental trauma Premature or untimely death of the victim or perpetrator Alcoholism and the possible complications Emotional trauma, fear in the woman A sense of helplessness on the part of the victim and family members Family disintegration Nigerian culture forces an abused woman to stay in the relationship The effected children may turn to the streets Embarrassment, Unhappiness, Shame, polygamy	Health problems from IPV on the victim	*Table continues* Secondhand trauma
5	The children suffer from low self-esteem, lateness and/or absent from school and work, truancy Children live in fear, family embarrassments, develop hatred toward the opposite sex, feeling bad and of sadness Family stress and disintegration, Cycle of violence	Effect of IPV on victim's family members	Secondhand trauma

Table continues

	A sense of helplessness on the part of the family members Unhappiness in the family, psychological problems on the involved children Children disrespecting their parent(s) Polygamy Economic loss		
			Table continues
6	Poverty, child delinquency, underdeveloped skills, low productivity The regard of IPV as a "family matter" or normal Violent community Negative effect on the family and community, children lose their potential Increased divorce rate	Effect of IPV on the community at large in Nigeria	Acculturation and understanding of IPV
7	Family members including their children Close/trusted friend Pastor and/or church elders Other women or colleagues Community leaders Not much social resource for the victims of IPV in Nigeria Police as last resort	IPV Victims seek help from who in Nigeria?	Acculturation and understanding of IPV
8	Yes. Change in perception of IPV Yes. It's quite different here. Yes. IPV criminalization policy creates fear in people not to perpetrate IPV Yes. United States has a good support system for victims of IPV No. Nigerian women endure IPV in the United States. for lack of family support No. America has resources that protects a woman victim of IPV Yes. Heightened awareness of IPV in the United States. Yes. The social norms differ from those in Nigeria No. The United States' approach to IPV is a reverse of Nigeria, IPV victims have	Understanding of IPV since arriving in the United States	Acculturation and understanding of IPV

Table continues

	resources to help them overcome their ordeal Yes. IPV is a crime in the United States Yes. The United States has social resources for victims of IPV, victims are believed, Criminalization policy helped influence understanding of IPV, some Nigerian family members still intervene in IPV cases in the United States, while criminalization policy helps with the prevention efforts it can also cause IPV because of change in culture No. The U.S. views IPV in reverse of Nigeria.		
9	Awareness campaign, Couples involved in IPV should separate Educate the Nigerian community about IPV Encourage effective communication among significant others Increase the awareness campaign Bring in both family members of those involved in IPV to help resolve it Make use available resources in New York City including using the legal system Promote "healthy and non-violent relationship." Use of family members in resolving IPV cases in the United States Educate the public on IPV Increase awareness campaign	How IPV can be prevented within the Nigerian community in New York City	Acculturation and Understanding of IPV

Assign Labels to Research Questions

The four themes that eventually emerged from the process of data analysis were

as follows: (a) emotional aberration, (b) Machismo, (c) secondhand trauma, and (d)

acculturation and understanding of IPV. For the theme or explanatory category of

emotional aberration, the key term was love. I noted that five of the narratives contained the word love about how the marital relationship ought to be, in contrast to marital relationships in which IPV occurs.. As I noted these similarities, the thematic block of emotional aberration emerged because, in all these narratives, participants emphasized that relationships in which IPV occurred were all deviations from the paradigmatic love marriage. Therefore, the noted recurrence of the word love, cross-comparison, and closer examination of narratives provided support for the thematic category that a deviation from normal aberration can lead to IPV. Although abusers use love as an excuse to perpetrate IPV, abuse is not an act of love. Instead, the participants described IPV as an emotional deviation from typical aberration.

The theme Machismo emerged from examining participants' responses to a single interview question, which was about whom they believed to be responsible for IPV. Because of the near unanimous assent that men were responsible for IPV, Machismo (male-gendered violence) was established as a distinct thematic category. I found additional evidence supporting this category by examining and cross comparing answers to questions in which gender was relevant.

The basis of the theme of secondhand trauma was not from recognizing repeated words or based on the agreement in answer to a single question. Instead, secondhand trauma appeared to be the best explanatory theme because its subsumed participants' repeated claims that they were, in various ways, emotionally injured by having witnessed IPV. Reading the transcripts a few times more confirmed that some participants had particularly intense and recurring memories of IPV, which appeared to be most

appropriately classified under the rubric of secondhand trauma (that is, trauma by witnessing, as none of the participants reported themselves as being either the victims or perpetrators of IPV). Some of the participants, such as participants L, expressed how he witnessed IPV as a teenager, yet it still affects him now that he is older. Therefore, secondhand trauma would also apply to the category, "the effect of IPV on the victim's family members," in which many of the participants described how IPV affects children of parents involved in IPV.

The data collected were analyzed to address the research question and add to the research results. No negative or discrepant information ran counter to the themes. Were there any discrepant findings, I would have reported it. Data analysis is an interactive, or recurring /systematic process, essential to the creativity of the analysis, development of ideas, clarifying the meaning, and reworking concepts as new insights emerge or are identified (Maxwell, 2013). Data are systematically searched and analyzed to provide an illuminating description of phenomena (IPV) (Maxwell, 2013).

The coding and thematizing of the study were easier to undertake manually than with the assistance of software. Because there were only 12 narratives in the study, it was possible to listen to, read, and read over again the data in a manner that allowed bottom-up, line by line coding, and thematization. Had more data been collected, a manual approach to data analysis might not have been possible.

Evidence of Trustworthiness

There were no adjustments undertaken to credibility, transferability, dependability, or confirmability strategies. The confirmability of narratives was

challenging to establish, as each participant discussed his own experiences so that no

other participant could corroborate. The face to face nature of the interviews might have

reduced credibility and dependability; especially given that the interviewer was a woman,

participants might have been reluctant to admit to having either perpetrated or suffered

IPV themselves.

Results

I elicited the following themes from the qualitative interviews conducted for the

study: (a) emotional aberration, (b) Machismo, (c) secondhand trauma, and (d)

acculturation, and the understanding of IPV. I discussed each of these themes in detail

below. Each thematic discussion is illustrated by representative quotes from different

participants, placed in juxtaposition to each other. The next major section of the chapter

contains the synthesized themes.

Emotional Aberration

Study participants described IPV as an emotional aberration—a phenomenon that

is not a natural outcome of emotions, but an instance of failed or missing emotion.

Participant A briefly summarized this theme by stating that the cause of IPV "is basically

there is no true love between them [spouses]." In Participant A's explanation, IPV is the

result of an absence or failure of love. This theme was reinforced by Participant J, who

noted his father's advice that "you must endure, persevere, and be patient enough; do not

let your anger come [to] overpower your spirit of love." For Participant J, this advice, and

his lived emotional reality, indicated an ontological view of IPV based on the absence of

love and intimacy. When love and intimacy are missing, then, according to Participants A and J, anger fills the void, and anger is the basis of IPV.

Participant L's comments recalled those of Participants A and J in situating IPV as a failure of emotion. Participant L advanced his belief that marriage is "supposed to be a cordial relationship; that's supposed to be filled with love and everything." Participant L, diverging slightly from Participants A and J in this regard, did not suggest that IPV occurs because of an absence of love; instead, according to Participant L, IPV—mainly male IPV towards women—occurs when a party in an intimate relationship takes exploitative advantage of the presence of love. This aspect of Participant L's narrative was like that of Participant K, who noted that, in polygamous households in the north of Nigeria, women who are self sacrificing, thoughtful, and loving towards their husbands are often beaten and sexually exploited by these husbands. Participant K disclosed how his mother, while being married to a man who had three other wives, was not the victim of IPV, perhaps because of her greater awareness of her personal and social rights. This awareness protected her from the kind of emotional exploitation that, according to Participant K, is common in polygamous households.

Participants A, J, and L were not the only participants who discussed IPV as an emotional aberration. Several other participants described IPV as a deviation from the kind of behavior that one ought to expect in an intimate relationship. Therefore, this theme can be summarized through the insight that, for the Nigerian men in the sample, IPV was at least partly the result of an emotional failure, typically on the part of a husband.

Machismo

The term IPV is not gendered, but one of the themes that emerged from the

analysis is that IPV is gendered masculine in Nigeria. This theme was expressed by

Participant B in stating, "98% of this violence is men being violent to females. I think it's

just a male superiority mindset." Participant C also contributed to the theme of male

gendered IPV by citing the widespread cultural belief that "women must be totally

submitted to the husband." Participant D added to the themes by identifying the Nigerian

cultural belief that "when the woman is not submissive to the husband, the men will

always exert their authority." According to Participant E's insight, "The belief [in

Nigeria] is that man has the upper hand over the woman, and, as such, they treat them as

a servant or sub class." Participant F's articulation of this idea was that "women are

supposed to be under the man." These comments are representative of beliefs widely

expressed by the sample of respondents.

However, the theme of Machismo was not without discrepant cases in data

analysis. Participant G noted that "some women, too, are very aggressive," a sentiment

that also occurred in the narrative of Participant H ("some women are very violent with

their husband[s]'). Participant C stated that "back home in Nigeria, men abuse woman a

lot, but here in the United States, a lot of women abuse their men." Participants C and G

wished to emphasize that female on male violence is not the norm in Nigerian

relationships; for both participants, IPV exists mainly in male on female violence.

Nonetheless, Participants, C and G, wished to note that it is indeed possible for IPV to go

in the opposite direction and that there needs to be the acknowledgment of this fact to reach a broader understanding of IPV's phenomenon itself.

The theme of Machismo contained a vital sub theme, that of culture. Many participants who identified male perpetrated violence against women as a cultural norm in Nigeria ascribed this type of IPV to a baseline cultural belief about men's superiority and women's inferiority. Few participants attempted to provide more in depth explanations of male gendered IPV. However, there were some scattered attempts at such explanations. Participant H, for instance, ventured the opinion that Nigerian men tended to perpetrate IPV against Nigerian women as a way of attempting to manage situations involving male adultery or philandering. Therefore, according to Participant H, Nigerian male IPV against women is not necessarily a general expression of control but a specific problem-solving strategy in illicit sexual behavior. Participant D provided an incredibly thoughtful explanation of male on female IPV's cultural dynamics, stating that the man sees himself as the head of the household and feels threatened whenever the partner or the woman tries to express her feelings, sometimes try to disagree with him on issues. So, many times if the man says something and thinks his idea is the superior idea, and the woman tries to say something that contradicts that, he becomes aggressive and physically attacks the woman.

Participant D's explanation is of interest because in several of the other male narratives that touched on the cultural support for males on female IPV in Nigeria, the discussion of this violence was a form of primordially sanctioned male superiority. Participant D was the only participant who provided a theory of male gendered IPV

against women by relating violence to specific issues of social control. Latent in Participant D's narrative, but explicit in Participant A's narrative, was the erosion of the male control. Participant A stated that, in many cases, IPV might be becoming a more systematic problem solving strategy for Nigerian men because of an economic rebalancing of "gender power." Whereas many of the other participants described male on female IPV as the expression of a general belief in male superiority in Nigerian culture, Participants A and D provided accounts in which male on female IPV can also be considered in light of the erosion, not the persistence, of male power against the woman, particularly in the context of matrimony.

Therefore, Participant A and D's comments can be considered the exploration of male gendered violence's underlying dynamics and motivations. Such explorations attempt to delve beneath what Participant F's uncritical cultural perspective: [acceptance and practice of male on female IPV] tends to be a cultural acceptance that is the way of life. "What led to it, I don't know, but that was the culture we were born into." Participants A, D, H, and K also accepted the theme of culture as the primary determinant of male on female IPV, but these participants were beyond a mere acknowledgment of the culture's role and attempted to provide more detailed and nuanced explanations of male on female IPV.

In this context, Participant K's account was somewhat similar to the IPV as problem solving account given by Participant H in that that Participant K described the violence as a problem solving strategy related to polygamous practices in the north of Nigeria. Participant K suggested that, in polygamous households, men perpetrate IPV to

address problems of sexual and domestic control that are perhaps more likely to arise in

than monogamous households. The narrative of Participant A also supported the theme of

male violence as a type of problem-solving strategy. He suggested that men were more

likely to be violent towards their spouses if they were being out earned by their spouses.

Male gendered violence was the theme for which there was the most voluble

support in the interview data. Almost every participant in the study described IPV

primarily in terms of the violence, that men (typically as husbands) perpetrate on women

(typically as wives) in Nigerian social contexts and settings. Also, the three participants

(Participants C, G, and H) acknowledged that female on male IPV is possible with the

emphasis that male on female IPV is far more prevalent and disconcerting. Male

gendered violence was described primarily in cultural terms, with several participants

noting that Nigerian culture sanctions and reinforces such gendered forms of violence.

None of the participants cited particular strands of culture—such as religious or tribal

practices—in their explanatory narratives. However, several participants attempted to

describe understandings of male on female IPV rooted in acknowledgments of men's

strategies to exert control and solve problems, particularly in the context of a changing

balance of power between the genders.

Secondhand Trauma

Experiencing trauma can occur both firsthand and secondhand, with secondhand

trauma occurring due to witnessing another person's pain (Horn, Puffer, Roesch, &

Lehmann, 2014). There was some evidence that Nigerian men experienced secondhand

trauma from IPV—that is, trauma occurring due to their witnessing IPV, among others.

Participant I told a story about admitting a male friend to his home and the male friend then engaging in IPV against his spouse. Participant I disclosed that "He kept beating this woman and I met her stark naked. It was a horrible sight, and [their] kid was right there. He was still beating—pounding this woman right before me. it's still here in my brain, and I just try to get it out of my brain." Participant I's inability to expunge the intensity of this experience is one of the symptoms of secondhand trauma and, in the context of data analysis, suggested the possibility that Nigerian men might indirectly experience IPV as a kind of secondhand trauma.

Participant K's narrative did not contain as obvious an account of secondhand trauma as that given by Participant, but, as someone who grew up in a polygamous household, Participant K was clearly disturbed by the IPV he witnessed. Participant K repeatedly described IPV as "gross abuse," and this recurring phrase, considered in context with the intensity of Participant K's dislike of IPV, indicated that Participant K might have experienced his secondhand trauma—as both his mother and sister were themselves part of polygamous households in which male perpetrated IPV was common.

The extraction of secondhand trauma as a theme was partly because of its direct relation to Nigerian men's IPV experience. Exposure to IPV perpetrated by others appears to have formed how Nigerian men conceptualize IPV. For instance, both Participants I and K reported a visceral dislike of IPV, particularly male-perpetrated IPV against women, because of the secondhand trauma associated with them witnessing IPV in their own lives. In a portion of Participant B's account, secondhand trauma need not be explicitly associated with IPV, but can arise from any act of witnessing male violence

against women. Participant B recalled witnessing a security guard in a Nigerian store start beating a pregnant woman for having gone into an employee section of the store. Participant B intervened and is still profoundly affected by what he saw: "If not that I'm a pastor, I would have killed him [the security guard]. I said: 'What are you doing? You don't even consider she has a baby?" The intensity of Participant B's response, as well as the ongoing intensity of his recollection of this act of male on female violence, suggests what was also explicit in Participant I's and K's accounts, in which the concept of men exploiting their physical strength and social position to beat women was experienced viscerally. Participants I, K and B, each noted that IPV is wrong, and beyond assessing this kind of cognitive judgment, disclosed strong emotions—and, indeed, secondhand trauma—associated with their male on female violence experience in Nigeria.

Participant E also reported secondhand trauma associated with an act of witnessing IPV: "The man beat her like a punching bag, just at his wish. So, that was the situation that I observed, and they are feeling implanted in me ever since." "He kept beating this woman, and I met her stark naked. It was a horrible sight, and [their] kid was right there. He was still beating—pounding this woman right before me. It's still here in my bran, and I just try to get it out of my brain." Participant E's narrative was very much like those of Participants B and Participant I, who emphasized that they had continued to carry painful, intrusive memories of, and impressions related to, their witnessing of male on female violence. As one of the characteristics of secondhand trauma is the inability to forget or appropriately process the memories of witnessed traumas, there was substantial

evidence that the act of witnessing IPV gave rise to secondhand trauma in some of the participants in this study.

Participant G utilized the term posttraumatic stress as part of a description of the effects of male on female IPV on women. As Participant G noted as part of a more complex discussion of remarriage after male on female IPV, "During this time, it causes a lot of—what would I call it? Posttraumatic stress on them. So, there's a lot of trauma involved in this." Participant G's sensitivity to the trauma experienced by Nigerian women who are victims of male IPV, isolated an important consequence of such IPV. However, Participant G's comment was also vital considering the secondhand trauma that appears to be carried by some Nigerian men who have themselves been witnesses to male on female IPV.

Participant B related the story of briefly (from the ages of 10-12) living with an aunt whose husband was abusive. Participant B related the intense feelings of all the children in this household, in which it was not uncommon for the man to instigate fights with his wife in the early hours of the morning. As Participant B stated, "we almost hated the man because he was literally bullying the lady, and we sympathized with the frail, simple woman who was the object of his wrath from time to time. I think all the children felt—I wouldn't say bad, they felt horrified." The visceral horror element described by Participant B strongly suggests the secondhand trauma that arose, and still appears to persist, among those who were witnesses to this instance of IPV.

Acculturation and Understanding of IPV

Acculturation refers to the cultural modification of an individual, group, or people by adapting to or borrowing traits from another culture (Berry, 1997; Lopez-Class, González Castro, & Ramirez, 2011). Acculturation begins with a cultural change initiated when two individuals, groups, two different societies, or diverse cultural systems make contact (Berry, 1997; Lopez-Class et al., 2011). That includes Nigerian born men living in New York City, adapting to American culture. Herskowitz (as cited in Lopez-Class et al., 2011) argued that there must be an examination of both existing and historical contents of cultures to understand contact resulting in cultural change. Glenn and Connell (as cited in Lopez-Class et al., 2011) corroborated this by stating that exploring historical circumstances and current developments would contextualize cultural differences pre- and post-contact.

Cultural adjustment of immigrants to the host country's culture includes changes in values and attitudes as they adapt to a new cultural environment (Lopez-Class, González Castro, & Ramirez, 2011). Usually, acculturation occurs because of prolonged contact (Berry, 1997). Acculturation may affect both the immigrants' social and psychological well-being, making acculturation both a risk factor for IPV and a potential preventive measure. Research has shown that while some immigrants may preserve the culture of origin because of the accompanying privileges, some, especially in modern societies such as the United States, try to retain the ideology that violence against women is a legitimate and normative way of ensuring the old social order (Berry, 1997; Donohue, 2014; Edelstein, 2013). Acculturation occurs in multiple domains, including

behavioral practices, identity, and values (Alves et al. 2016; Rudnev, 2014; Sabina, Cuevas, & Schally, 2013).

Participants in this research shared their diverse experiences and opinions on the effect of acculturation on their understanding of IPV. All twelve participants expressed heightened awareness of IPV since immigrating to the United States primarily because of the criminalization policy that the United States has that Nigeria does not have. However, they differed in their perception of the IPV criminalization policy's influence on perceptions and decreasing IPV in the United States. Participant G used the exact words, "Heightened awareness of IPV in the United States" to describe what influenced his understanding of IPV since living in the United States. Participant K added that "IPV is a crime in the United States. Participant A attributed his heightened awareness of IPV directly to the United States' criminalization policy that Nigeria lacks. Participant L also said that "Criminalization policy helped influence {his} understanding of IPV." However, though Participant E agreed to a heightened awareness about IPV since immigrating to the United States because of the IPV criminalization policy, he also said that cultural transition could also trigger negative emotions in a man because of the real threat immigration to the United States poses to patriarchal culture. Participant E added that "Nigerian women endure IPV in the United States for lack of family members to run to for a solution." Participant G also conceded that while the United States IPV criminalization policy helps understand IPV, it also threatens the family unit. He gave the example that when a father has a restraining order against him or gets arrested for IPV, he has limited access to his children. Participant L shared the same concern that

"Criminalization policy helps with the prevention efforts of IPV" but added that it "can also cause IPV for {because of} change in culture."

In the data analysis, some participants, such as Participant K, articulated that acculturation can be a risk factor for IPV due to the difficulties that may arise from power imbalances resulting from women entering the workforce and beginning to experience greater economic freedom. Such freedom for Nigerian women in the United States may threaten existing gender roles, resulting in loss of self esteem and increased stress for some Nigerian men living in New York City who may have difficulty finding a job to support their families. Situations such as these may result in violence to vent frustration. That is in line with Alves et al. (2016), Kim & Sung (2015), and Ramos's (2013) assertions that stress from acculturation increases the risk of using violence as a response to interpersonal conflict. Participant A credited his new understanding of IPV to acculturation, so did Participant F. Participant B and Participant K added education as a way they gained new knowledge on IPV since they lived in the United States.

Table 3

Perception since arriving in the United States

Has your perception of IPV changed since arriving in the United States?	What influenced your perception of IPV since arriving in the United States?	What's your view on the United States IPV criminalization policy?	Do you believe the United States IPV criminalization policy helps or hurts in the prevention efforts
Participant A = No.	Acculturation	Supportive of the United States IPV	It has not helped

		criminalization policy	
I believe it's the same thing everywhere			
Participant B = Yes	Acculturation Education United States IPV criminalization policy	Supportive of the United States IPV criminalization policy	It helps
Participant C = Yes	Awareness, Public Awareness through all forms of social media United States IPV criminalization	Supportive of the United States IPV criminalization policy	The United States IPV criminalization policy helps but it is also a threat to the family unit
Participant E = No Nigerian women endure IPV in the United States for lack of family members to run to for solution	Acculturation enhances the understanding of IPV	Supportive of the United States IPV criminalization policy	The United States IPV criminalization policy helps the prevention Efforts
Participant F = Yes	Acculturation heightens the understanding of IPV	Supportive of the United States IPV criminalization policy	It helps

Table continues

Participant G = Yes	The United States IPV criminalization policy Awareness, Public Awareness	Supportive of the United States IPV criminalization policy	The United States IPV criminalization policy helps but also threatens the family unit
Participant H = Yes	Acculturation The United States IPV criminalization policy Public Awareness	Supportive of the United States IPV criminalization policy	It helps

	Education		
Participant I= No The United States approach to IPV is a reverse of Nigeria, IPV victims have resources to help them overcome their ordeal	Acculturation enhances the understanding of IPV	Supportive of the United States IPV criminalization policy	It helps
Participant J= Yes	The United States IPV criminalization policy Public Awareness	Supportive of the United States IPV criminalization policy	It helps
Participant K= Yes	Education Acculturation	Supportive of the United States IPV criminalization policy	It helps
Participant L= No but awareness Increased	The United States IPV criminalization policy	Supportive of the United States IPV criminalization policy	It helps

Overall, the participants in this research expressed enlightenment on the phenomenon, IPV, since arriving in the United from Nigeria and supporting the United States IPV criminalization policy. All in all, the findings in this research led to the conclusion that acculturation affects the understanding of IPV among Nigerian men living in New York City, including policies against IPV.

Missing Elements in the Data

One of the emerging best practices in qualitative data analysis is to describe what was missing or unexpected in the data. In this context, one of the points of interest in the data analysis was the failure to identify participants' explanations for male on female IPV's cultural basis. As noted, several participants adduced cultural practice as one of the bases for male on female IPV in Nigeria, but none of the participants appeared willing to discuss the specific cultural precursors of such gendered violence. The interview protocol questions were sufficiently open ended to allow participants to present specific cultural accounts of male on female IPV, but such data were not forthcoming. Possibly the participants did not wish to be explicitly critical of specific aspects of Nigerian cultural practice; nonetheless, this attitude conflicts with the identification of culture itself as a determinant and reinforcer of male on female IPV.

In general, the narratives were moderately rich. Many participants shared personal stories involving relatives and friends, offering more profound layers of insight into how they perceived IPV. However, none of the participants in the study offered personal examples of having committed IPV. Although there was no a priori reason to believe that the sample would contain men who had committed IPV, the interview protocol was sufficiently open ended to allow participants to discuss such personal behavior if they chose to do so. The fact that none of the participants admitted to IPV suggests the possibility that either that the sample did not contain any men who had committed IPV or that the research setting and context emphasized the vulnerability that would result from making such a disclosure. Even if the sample did not contain any men who had

committed IPV, it is still of interest that none of the participants discussed any form of violence that they, as men, had either committed or perhaps thought of committing. One of the points made in Chapter 5 is that future researchers should consider anonymous protocols in which men are likelier to share IPV narratives and disclose less filtered thoughts about how they understand IPV to elicit richer insights into IPV. For example, in the current study, none of the participants were willing to dismiss male on female IPV as not a problem or say that it is an overblown problem. For example, in the current study, none of the participants were willing to dismiss male on female IPV as a non-problem or as an overblown problem. Participants' beliefs or expectations that the I was only receptive to a certain kind of a politically correct narrative about IPV could have skewed the result. If the Participants' beliefs or expectations were that I was only receptive to a certain kind of a politically correct narrative about IPV, it could have skewed the result.

The theme of IPV is sensitive. it is unlikely IPV would be disclosed by its perpetrators in the context of a research study, especially if the people making such disclosures are immigrants or others of tenuous legal status in the United States. From this perspective, the primary missing element in the data is IPV as either perpetrated or directly experienced by any of the study participants. This data limitation might be a function of the face to face interview medium. Data collection in both a private and anonymous format (such as internet based data collection) could have disclosed IPV's firsthand experience narratives.

Synthesis of Themes

Although the 12 participants in this study provided rich narratives that contained many themes, the four themes that appeared to recur most frequently in the narratives were (a) IPV as an emotional aberration, (b) IPV as a culturally sanctioned and reinforced form of male on female violence, (c) secondhand trauma arising from the witnessing of IPV and (d) change in the understanding of IPV due to acculturation. These four themes emerged from the interview data's hand coding through the methods described in Chapter 3. Each of these four themes can be related to the broader research question of how Nigerian men understand IPV. First, to IPV's theme as an emotional aberration, Nigerian men understand IPV as a failure of emotion. In this respect, they think of IPV as a phenomenon that fills the relational gap between love and intimacy. Second, for IPV's theme as male on female violence, Nigerian men understand IPV as an expression of and attempt to maintain culturally sanctioned male superiority. Third, for the theme of secondhand trauma, Nigerian men do not merely understand IPV in cognitive terms but also appear to be traumatized by having seen IPV around them. Fourth, Nigerian men in New York City gained a heightened awareness of IPV since arriving in the United States. Evidence for each of these themes was adduced earlier in the data analysis, strengthened by salient quotes. The purpose of this section of the chapter is to synthesize the themes into a single explanatory framework.

Based on the themes elicited from the 12 narratives in the study, one plausible synthesis to the question of how Nigerian men understand IPV is to observe that Nigerian men understand IPV as a single construct with an emotional, sociocultural, and visceral

dimension. They based the emotional dimension of understanding IPV on internalized

norms, expectations, and assessments—typically transmitted from parents—about how

intimacy ought to be. The emotional dimension offers Nigerian men a perspective from

which to classify IPV as a failure of emotion and intimacy. They based the sociocultural

dimension of understanding IPV on Nigerian men's cultural map. IPV is a regrettable but

culturally sanctioned practice that is both primordial and contemporary, particularly in

terms of functioning as a problem solving strategy for men in times of redistributions of

gendered power. The basis of the visceral dimension of understanding IPV was on their

profoundly emotional, traumatic response to having witnessed IPV. These three

dimensions collectively indicate that Nigerian men understand IPV at three levels—

effectively, culturally, and viscerally—that otherwise intersect with, and complement,

each other. The practical, cultural, and visceral dimensions of Nigerian men's

understanding of IPV indicate that, for this population, IPV is a complex phenomenon

that elicits cognitions, emotions, and cultural assessments.

Summary

The purpose of this chapter was to present the results of the study. I subdivided the

results into (a) themes and (b) synthesis of themes. The themes that got plausibly

extracted from the data were as follows:

- Emotional aberration, a theme that suggests IPV—mainly male perpetrated IPV

  directed towards female spouses—occurs either because of the absence or the

  exploitation of love.

- Male gendered violence is a theme that suggests that IPV—particularly male perpetrated IPV directed towards female spouses—occurs because of cultural beliefs in and practices related to male superiority. A subtheme that emerged within this theme was male IPV as an expression of socio sexual problem solving strategies.

- Secondhand trauma is a theme based on exposure to IPV as having prompted a visceral dislike of this form of violence.

- Acculturation and the understanding of IPV is a theme deduced from Nigerian men's expression that their knowledge about IPV has changed since immigrating to the United States. These four themes emerging from qualitative—specifically, descriptive phenomenological—data analysis was then synthesized into an effective-cultural-visceral model that better delineates how Nigerian men understand IPV.

Chapter 5, the conclusion of the study, builds upon the findings presented in Chapter 4. Chapter 5 contains a discussion of the findings concerning the study's theoretical framework and past studies on IPV. It also contains an acknowledgment of the limitations of the methods I used to extract data in Chapter 4 and a discussion of the data's limitations. Finally, Chapter 5 contains suggestions about how future researchers can expand upon these research findings by applying new research designs.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

In this chapter, I discuss the findings of this research relative to how they relate to the existing literature, what implications they hold for the population studied, and how they inform the understanding of the influence of acculturation on IPV for Nigerian born men living in New York City. I also discussed the research limitations and suggestions for future research based on this study's findings.

This research aimed to understand the experiences of IPV by Nigerian men living in New York City. There is an abundance of evidence of how immigration and acculturation are the chief instruments of cultural change (Johnsdotter & Essén, 2015; Mose & Gillum, 2015). Most of the previous research found that the higher the acculturation level of immigrant men, such as Nigerian born men living in New York City, the less the risk of IPV for immigrant women. Further evidence showed the contrary (Kim & Sung, 2015; Pierotti, 2013). This research was on the influence of acculturation on the understanding of IPV by Nigerian men living in New York City, thus advanced research on the influence of immigration and acculturation on IPV's understanding.

Research on acculturation has shown that many changes occur among immigrant populations as they endeavor to adapt to their host country. These changes involve conflicts that often result in new forms of behavior that modify normative values in the original culture (Mose & Gillum, 2015; Prieto, Sagafi-nejad & Janamanchi, 2013; Ramos, 2013; Sabina, Cuevas & Schally, 2013).). This research explored how Nigerian born men living in New York City now understand IPV differently due to acculturation. I

conducted this research using the qualitative phenomenological research methodology to examine 12 Nigerian born men's understanding of IPV when they lived in Nigeria and the United States.

The research revealed emerging themes that have implications for IPV prevention, particularly within the Nigerian community in New York City, and portrayed the experiences of Nigerian-born men regarding IPV while living in New York City and Nigeria.

Interpretation of Findings

A key finding in this research using the qualitative research design to determine the understanding and attitudes towards IPV is that most Nigerian born men in New York City developed a different understanding of IPV since their arrival in the United States. Previous research with other immigrant groups tied change in understanding IPV to experience IPV in their host countries such as the United States (Alves et al. 2016; Carbó, Ahumada, Caballero, & Argüelles 2016; Edelstein 2013; Essén 2015 & Johnsdotter, 2015). Abramsky et al. (2016) and Pierotti (2013) also showed that immigration alters people's understanding of IPV.

Four themes emerged in the study and can each bolster an understanding of IPV in a broader context of acculturation's influence on the understanding of IPV. The four themes are an emotional aberration, secondhand trauma, Machismo, and Acculturation and understanding of IPV. They are each independently supported by the interviewees' accounts and experiences, as noted in Chapter 4.

Emotional Aberration

Makama (2013) explained that due to Nigeria's strong patriarchal societal

structure, men can marry as many wives as they like without considering their feelings,

especially where the woman has not yet born a child. The 2013 Nigeria Demographic and

Health Survey (NDHS) and Makama (2013) further described how the three religions in

Nigeria contribute to the suppression of women and support issues against women such

as widowhood, wife inheritance, female genital mutilation practices, and others in

Nigerian society. On the emotional level described by Makama (2013) and other scholars,

Nigerian men living in New York City allowed American society to reveal human traits

such as emotions as empathy to feel for women's interests such as an abused woman. The

revelation of emotional aberration by this research on the IPV experiences of Nigerian

men living in New York City thereby adds to the well documented evidence by scholars

that perception can affect attitudes towards IPV, considering that interaction between the

environment and self can produce a normal or abnormal emotional reaction (Kastanakis

& Voyer, 2013).

Perception can make people sensitive or insensitive to a phenomenon such as IPV

depending on the interpretation of information (Bardi, Buchanan, Goodwin, Slabu &

Robinson, 2014). As in the case of IPV, a husband can react to his wife, based on how he

interprets a situation between them. The implication could well be that a perceptive

husband may not abuse his wife. For example, Participant A mentioned , "Lack of mutual

respect, no true love, misunderstanding," as some of the causes of IPV, whereas

Participant K stated, "Jealousy from the husband or cowives" as reasons a husband might

perpetrate IPV against his wife. Nigerian men in New York City viewed IPV as a part of their tradition or culture before moving to the United States. Some of them now understand affection and empathy as key to preventing IPV in relationships for Nigerians in New York City.

Secondhand Trauma

Mose & Gillum (2015) found an association between IPV against women and the cycle of violence relative to secondhand trauma or exposure to violence. Secondhand trauma can come from witnessing someone else's trauma and lead to perpetrating violence against another as Participant E inferred that the cycle of abuse (violence perpetrated from witnessing violence) could cause the victim emotional and mental trauma. Previous research has shown that trauma can play a significant role in developing anger, aggression, and violent tendencies (Akinsulure-Smith, Chu, Keatley, & Rasmussen, 2013). As such, previous trauma may play a role in the emergence of IPV among the target population. As previously noted, one can experience trauma in both firsthand and secondhand fashion, with secondhand trauma occurring due to witnessing another person's pain. Research indicates that some Nigerian men experienced secondhand trauma from IPV (Akinsulure-Smith et al., 2013). As such, trauma occurring due to their witnessing IPV, among others, may fuel IPV just as IPV can fuel such trauma. One of the study participants witnessed a male friend engaging in IPV against his spouse, and thus, seemed to have suffered secondhand trauma from the attack. That the Participant could not expunge the intensity of this experience indicates possible post-traumatic stress disorder (PTSD) and, in the context of data analysis, suggested the

possibility that Nigerian men might indirectly experience IPV as a kind of secondhand trauma (Akins lure-Smith et al., 2013). This suggests that the results of the current study support the two way connection between secondhand trauma and IPV. The development of PTSD may be a mediating factor, but the current study cannot confirm or support this.

The interviews revealed additional accounts of secondhand trauma. For example, one participant (K) was visually disturbed by what he saw in one case of IPV. The participant (K) described the IPV as a gross abuse, and this recurring phrase suggested that participant K might have experienced secondhand trauma. Both his mother and sister were themselves part of polygamous households in which male perpetrated IPV was common. However, secondhand trauma has been identified as a significant theme of the current work because of its direct relation to Nigerian men's IPV experience, as evidenced by previous research (Akinsulure-Smith, Chu, Keatley, & Rasmussen, 2013). Exposure to IPV on others appears to have formed how Nigerian men conceptualize IPV, creating an IPV loop. Witnessing IPV may make it more likely for the person to commit IPV, regardless of their past opinions and attitudes (Edelstein, 2013). Two participants reported a visceral dislike of IPV, particularly male perpetrated IPV against women, because of their secondhand trauma associated with witnessing such IPV in their own lives, but this does not suggest that they are immune to committing IPVC. Secondhand trauma is not always explicitly associated with IPV but can arise from any act of witnessing male violence against women (Igwe, 2015). One participant recalled witnessing a security guard in a Nigerian store start beating a pregnant woman for having entered the employee only section of the store. The intensity behind the response

demonstrated the perceived wrongness of IPV as a violation of social norms and the law.

Most participants viewed IPV as an exertion of men's physical and emotional coercion

during women, which will be discussed further in the discussion on Machismo.

Nevertheless, it is essential to consider how men may more quickly adopt IPV tendencies

after experiencing secondhand trauma.

Some participants emphasized that they had continued to carry painful, intrusive

memories of, and impressions related to, their witnessing of male on female violence,

suggesting that the secondhand trauma had emotional and psychological effects on them.

A new question is whether secondhand trauma can serve to thwart IPV in some cases.

After all, these participants immediately rejected IPV because they had witnessed it

previously. These participants may be inclined to avoid situations and contexts in which

IPV may arise, including cases in which they consume alcohol to excess or enter an

argument with a romantic partner. A characteristic of secondhand PTSD is the inability to

forget or appropriately process the memories of witnessed traumas. There was substantial

evidence that the act of witnessing IPV causes secondhand trauma in some of the

participants in this study, suggesting that IPV may contribute to PTSD or future IPV in

complicated ways. Additional research is needed to determine the possible causal

connections between secondhand trauma and IPV.

Machismo

Research on IPV and masculinity such as Wilkerson & Cuffe (2015) suggested

that men's tendency to value and defend their masculinity can have potentially severe

negative consequences such as IPV. That is because the machismo mentality promotes

destructive behaviors and sexist attitudes that reinforce social inequality (Vandello & Bosson 2013; Glick, Wilkerson, & Cuffe, 2015). The current research on the influence of acculturation on the understanding of IPV by Nigerian men living in New York City adds to the concept that masculine identification (the centrality of gender identity to the self) relates to men's attitudes toward IPV, the level at which men categorized women according to gender as opposed to their human value (Glick, Wilkerson & Cuffe, 2015). The current research further adds to the findings that masculine identification relates to male favoritism toward masculinity and bias toward women in a way that necessarily reinforces the traditional male and female gender roles (Glick, Wilkerson & Cuffe, 2015).

Some participants had recollections of male on female violence, suggesting that they viewed men as exploiting their physical strength and social position to beat women. While all participants noted that IPV was wrong, many recognized the superiority claim of Nigerian men over the woman could be associated with their experience of male on female violence in Nigeria, suggesting possible explanations for such violence.

A notable feature of the participants' accounts was how vivid the details of IPV, in which men were beating women in Nigeria, were.   For example, Participant F reported consideration of women as second-class citizens as being associated with IPV. He described a man treating a woman like a punching bag. The emphasis was like other participants who attributed male to female IPV to the cultural belief that a man is superior to a woman and the claim of the woman as a man's property or a perceived disrespect of the man by the woman.

Evidence indicates that power dynamics in Nigerian cultures appear to support some forms of male violence against women, especially partners (Fulu et al., 2014; Makama, 2013; Mose & Gillum, 2015; Onigbogi, Odeyemi. & Onigbogi 2015; Pereira, Vieira, & Magalhães, 2013). The association between masculinity and IPV also appears to hold both in Nigeria and globally (Ozer & Schwartz, 2016; Wright & Benson, 2010). Therefore, for immigrants, in the absence of acculturation, the experience of IPV from cultural constructions of masculinity and femininity that can lead to IPV would remain the same (Sabina, Cuevas & Schally,2013). The reason is that in contexts of privilege and power, there is a need to recognize the social struggles in which subordinated masculinity influences dominant forms of behavior that could lead to IPV (Glick, Wilkerson, & Cuffe, 2015).

Hamberger and Larsen (2015) and Igwe (2015) implied that individual level factors such as gender related sociocultural norms at the community level play a significant role in influencing IPV risk. Individual level factors such as gender related sociocultural norms at the community level also play a significant role in influencing IPV risk (Hamberger & Larsen, 2015; Igwe, 2015). These norms are shared expectations of how men and women should behave, which are highly influential in shaping individual behavior (Akinsulure-Smith, Chu, Keatley, & Rasmussen, 2013; Beauchamp, Lindsay, Hunter, & Talavera, 2012; Donohoe, 2014). My current research on IPV experiences by Nigerian men living in New York City lent support to the fact that traditional gender roles are a factor that presents a risk for IPV in the Nigerian community. Some

participants identified male perpetrated violence against women and viewed this trend as a cultural norm in Nigeria.

Virtually all the participants in the current research inferred machismo as one of the Nigerian cultural factors for male perpetrated IPV against women due to the cultural beliefs that men are superior to women. While some of the participants implied it, Participant B attributed "the superiority claim of Nigerian men to their women" as one of the cultural roots of male IPV against females. Participant H held that Nigerian men tended to perpetrate IPV against Nigerian women as a way of attempting to manage situations involving male adultery or philandering, suggesting gender based power dynamics that are reinforced by cultural norms. Nigerian male IPV against women is not necessarily a general expression of control but a specific problem solving strategy arising in illicit sexual behavior contexts, suggesting a cultural basis of activity. Acculturation, then, would be the expected remedy for gender dynamics and gender nor based sources of IPV. Even research on other forms of violence finds that immigrants have lower levels of IPV secondary to acculturation. It is a relationship that appears to be partially mediated by cultural norms in the host country (Nava, McFarlane, Gilroy & Maddox, 2014).

Gender roles are a potential risk factor for IPV among the target population based on prior research. Traditional gender roles in Nigeria tend to assign women to a domestic role, while the men generate an income for the family, which puts men in a dominant position over women (Makama, 2013). Such gender roles may perpetuate IPV against women (Makama, 2013). Nigerian women face abuse of any kind, often at the hands of their spouses and their family members, suggesting that violence against women has

various forms, including family violence. Various factors identified as contributing to IPV in Nigeria include drunkenness, financial hardship, and the rejection of a partner's advances (Makama, 2013; Nnadi, 2012). The current research findings do not support all these factors. The findings identified perceived gender norms and gender dynamics in the Nigerian cultures as sources of IPV, which may help explain why some of these factors are contributing to high rates of IPV. Controlling behavior caused by gender norms, lower socioeconomic status, age disparity, and unemployment also serve as significant IPV factors in Nigeria (Nnadi, 2012). These were confirmed in the current study and may provide additional opportunities to explore IPV factors in the future.

Prior research shows that Nigerians embrace their culture based on their circumstance and ethnic group (Adogu et al., 2015). There is a strong patriarchal societal structure in Nigeria that promotes men to marry as many wives as possible, creating a polygamous condition that promotes violence through gender imbalances and dynamics (Makama, 2013). Also, in Nigeria, male elders often preside during conflict resolution in the home or local community, meaning that men ultimately have control over societal regulations of behavior (Akinsulure-Smith, Chu, Keatley & Rasmussen, 2012). Such factors may contribute to the perceived control many Nigerian men have over their wives and romantic partners, providing additional opportunities for IPV. While the current research does not connect societal behavioral regulations with IPV, the respondents sufficiently recognized gender norms as sources of men exerting control over women in the form of IPV.

Prior research also shows that religion may play a role in reinforcing imbalanced gender dynamics that promote men controlling women, including using IPV (Waltermaurer, 2012). Nigerian religions promote the notion that boys and young men can utilize violence and dominance over women as a masculinity component, reinforcing violence against women (Igwe, 2015). The targeted oppression of women affects societal positions regarding female value. It helps Nigerian society adopt the misogynist attitudes that serve to generate stereotypes of men and women's roles, and create inequality between genders, further facilitating violence against women (Waltermaurer, 2012). Many of the participants' narratives in the current work support this position, primarily through the examples of witnessing IPV in Nigeria. An example is Participant B's attribute to IPV's causes as a "Superiority claim of some Nigerian men to their women." That answer, supported Participant I's response when asked to name some of the causes of IPV, and he said, "the cultural norm of men beating their wives, and consideration of women as secondhand citizens."

Acculturation and the Understanding of IPV

Nigerian men in New York City have a different understanding of IPV from when they lived in Nigeria, similar to what was reported by Kastanakis and Voyer (2013). Kastanakis and Voyer asserted that people interpret things differently in different environments. The exposure to another environment (the United States) aroused awareness for most participants in this research to perceive IPV differently than they did in Nigeria. The findings in this research adds supporting evidence to the concept that culture change can influence the understanding of IPV.

In examining IPV knowledge by the participants since arriving in the United States, 9 out of the 12 participants expressed a change in their understanding of IPV since entering the United States. They gave different reasons for this. Participant A acknowledged a

"change in perception of IPV," adding that "the criminalization of IPV is the best thing that could have happened for people in the United States. If somebody raises a hand against another person, that is criminal and the person that perpetrates such acts, I believe they should pay for it."

Participant B also acknowledged, "It is quite different here in the United States." That answer was echoed by Participant H, who said, "The United States social norms differ from those in Nigeria." Participant C added that "the United States has a good support system for victims of IPV." In the United States, there are laws against IPV with which Nigerian men must contend. Before emigrating from Nigeria, many of the participants did not understand the consequences of perpetrating IPV or that victims can receive services from the State or Federal government, including legal services, in the United States. Thus, this research advanced the proposition that societal rules and regulations also influence the understanding of IPV with Participant D saying, "IPV criminalization policy helps the prevention efforts." This was supported by Participant J, who noted that "IPV is a crime in the United States."

On a different dimension, despite the cultural and structural variations, not everyone was receptive to the cultural change. For example, Participant E stated: "Nigerian women endure IPV in the United States for lack of family members to run to

for a solution," which implies the choice to handle IPV as in the country of origin than how the United States does. Participant F also did not agree to a change in the understanding of IPV since arriving in the United States, "America has resources that protect a woman victim of IPV." Participant L added that "The United States is in reverse of Nigeria." The three responses signify that the only difference between how IPV cases are treated in Nigeria and the United States is that they are different countries. However, there are also acculturation literature on the persistent traditional patriarchal tendencies and attitudes towards IPV by immigrants (Asaju, Bott, & Denen, 2014).

Theoretical and Conceptual Frameworks

Berger and Lukeman's (1960) social construct of reality theory and the Lévi-Strauss culture theory of knowledge (1958) were used to frame this research theoretically. Society influences human behavior, and stress from culture affects social cognition, creating some forms of knowledge (Berger & Lukeman, 1960; Berger & Lukeman, 1966). Cultural factors, such as the degree of acculturation, could substantially influence how people respond to a phenomenon like IPV. Hence relative to this research on the experiences of IPV by Nigerian men living in New York City, the levels of acculturation of the participants were pertinent. That is because acculturation is a process that brings about change over time as people interact with foreign cultures (Pierotti, 2013).

The research on the influence of culture and acculturation on immigrants' behavior and experiences showed an effect on understanding IPV (Kalunta-Crompton, 2013; Kim & Sung, 2015; Kastanakis & Voyer, 2014). Acculturation and understanding

of IPV are not unified influences on individual behavior, instead, the insights are that the

outcomes are dependent upon the expectations of the society relative to the immigrant's

complex negotiations (either implicit or explicit) to act according to the culture of the

host country or culture of origin (Berry, 1997; Berry, 2007). Nigerian men in New York

City now understand IPV differently than they did living in Nigeria. That is evident in the

data showing that most participants expressed a change in their understanding of IPV

because the United States social norms differ from Nigeria. Participant G expressed,

"Heightened awareness of IPV in the United States." Participant K followed with

crediting the "Criminalization policy" as having helped with influencing his

understanding of IPV and the prevention efforts and said that it {the United States

criminalization policy} could lead to IPV because of the change in culture.

<div align="center">**Limitations of the Study**</div>

The significant limitations of the current study involve finding a representative

sample and determining with some certainty whether the experiences of the participants

reflect those of Nigerian men living in New York City regarding IPV. The first issue

concerns the diverse Nigerian population. As previously noted, the CIA (2017) reported

that Nigeria has 250 ethnic groups. The three largest ethnic groups are the Hausa

comprising 29%, the Yoruba comprising 21%, and the Igbo (Igbo) comprising 18% of

the population (CIA, 2016; CIA, 2017. Therefore, there is massive ethnic diversity in

Nigeria. Achieving a representative sample accounting for such ethnic diversity was not

practical. Finding representation from all the ethnic groups or even most in the United

States or New York City would have been impossible. As such, I sought no specific

ethnic group representation for this study. Nigerian males living in New York City qualified regardless of ethnicity. This limits the generalizability of the results of the study, given the lack of ethnic representation. Cultural norms may differ by ethnicity, after all. Even so, the study design still generated a sample with enough representation of Nigerians in New York City in general.

The convenience sampling method may not have captured other critical aspects of IPV experiences, such as acculturation stress and non participation of individuals who perpetrated IPV. There were no telephone interviews conducted except for the member checks. If there were telephone interviews, they would have limited the type of data gathered because some nonverbal cues that come with a face to face interview would have been missing. That is relevant because of the type of qualitative phenomenological description that the research was intended to generate. Nevertheless, the tone and syllabic stresses were recorded, overcoming some of the lack of nonverbal cues.

Finally, the fact that none of the Nigerian men in the sample reported either committing IPV themselves or being victims of IPV, participants' narratives did not shed light on the question of what it might feel like to experience IPV as either the originator or the recipient of IPV. The perpetrator's perspectives were absent from the narratives and was not be addressed in the data analysis. Instead, the men in the sample described IPV as a phenomenon that they had either directly observed in others or knew to exist in Nigerian society and culture. Therefore, the findings of the study should be understood in terms of descriptive phenomenology. Only the accounts provided by the respondents served to inform the findings, which though they do not reflect the attitudes, opinions,

and experiences of the perpetrators of IPV, they still offer valuable insights into the intersection of Nigerian culture, IPV, gender relations, and acculturation.

Recommendations

As previously indicated in this chapter, this research aimed to explore the IPV experience of Nigerian men living in New York City to determine their knowledge, understanding, and experience of IPV from when they lived in Nigeria and now that they live in the United States. A qualitative approach was adopted using the semi structured interview guide widely utilized in qualitative research. This current research was a relatively small scale exploratory study. The high level of consistency with the literature reviewed suggests that the issues identified may be generic and relevant to Nigerian men living in the United States or the Western world. The results indicate significant acculturative influence related to the experience with IPV. However, there is a need to explore how the level of acculturation might affect the knowledge, experience, and understanding of IPV by Nigerian men in the Diaspora.

Documentation has shown that IPV occurs in African women's lives, including Nigerian women worldwide (West, 2016). Western countries have seen an influx of African immigrants (Gambino, Trevelyan, & Fitzwater, 2014; Ogunsiji, Wilkes, Jackson, & Peters, 2012; West, 2016). Due to such migration patterns and the prevalence rates and risk factors for IPV and the types of violence among Nigerian women, researchers must continue investigating Nigerian men's IPV experience in the Diaspora.

The use of a mixed method of research to study the effect of the level of acculturation on the understanding of IPV by Nigerian immigrants could help obtain

more accurate and complete data and increase the reliability and validity of the current research results. The research could also explore the effect of education on acculturation and the knowledge, experience, and understanding of IPV by Nigerian men in the Diaspora. The research could also explore the influence of education on acculturation and the knowledge, experience, and understanding of IPV by Nigerian men in the Diaspora. Another aspect of this research worth exploring would be how giving up their cultural identity and becoming absorbed into the host culture or maintaining one's cultures and accepting and adapting to the host's cultures could influence the knowledge, experience, and understanding of IPV by Nigerian men in the Diaspora. There should also be an examination of other acculturation strategies such as how rejecting the host country's culture and maintaining one's cultural identity or failed attempts at participating in a new society while simultaneously experiencing cultural loss could influence the knowledge, experience, and understanding of IPV by Nigerian men in the Diaspora.

Another aspect of this research worth exploring is how integration, assimilation, separation, and marginalization affect the knowledge, experience, and understanding of IPV by Nigerian men in the Diaspora. Also, exploring the effect of different acculturation strategies integration, assimilation, separation, and marginalization on the knowledge, experience, and understanding of IPV by Nigerian men in the Diaspora are worth exploring.

Implications

The current study's significant implications demonstrate an understanding of cultural factors that influence IPV among Nigerians in New York City. The research

focused on the influence of acculturation on IPV experiences among Nigerian men living in New York City. The research contributes significantly to the knowledge about the influence of acculturation on IPV experience among Nigerian immigrants. The findings may lead the Nigerian community in New York City to make changes to their behavior that might help address the IPV problem or at least inform future research that can provide additional data to facilitate such changes. Further exploration of whether there are changes in the understanding and experience of IPV of the Nigerian Diaspora through that lens, particularly among Nigerian men currently living in New York City, could use the current research as a tool. Decker, Miller, Illangasekare, and Silverman (2013), for example, found that IPV prevention begins primarily with an understanding of how people interpret IPV and that understanding related to knowledge, attitude, and behavior in populations are fundamental to social change, suggesting that additional research on perceptions of IPV and possible cultural factors of IPV are worthy of exploration. Facilitating change in the New York City Nigerian community will take time. The direct implications of the current work will be to drive future research in this area, even providing a preliminary foundation for researching what Nigerian men living in New York City thought about IPV before and after migrating to the United States, which can serve future research endeavors.

One of the most immediate social changes resulting from this research is the change in IPV perception by Nigerian men living in New York City who took part in this study. The results may help develop recommendations on culturally appropriate support and prevention programs for IPV for Nigerian immigrants. Such recommendations may

help policymakers and health care leaders in Nigeria implement new policies or add to or

changes to the existing policies to prevent IPV.

The primary contribution of the current research it bolsters future researchers'

efforts in the field. Some states in Nigeria have enacted many policies to help reduce IPV

(Madu, 2015), and the United States as a nation also has many policies to help reduce

IPV (Modi, Palmer, & Armstrong, 2014). Research on culture transition by immigrants in

modern societies, i.e., the United States, suggest that greater acculturation can help

minimize the violence caused by immigrants such as current Nigerians who still follow

Nigerian cultural and social traditions and norms (Kalunta-Crompton, 2013; Kim &

Sung, 2015; Kastanakis & Voyer, 2014). This research suggests essential and neglected

issues for policymakers in the countries without a national policy against IPV, such as

Nigeria. The strategy for IPV prevention in Nigeria and Nigerian men living in the

United States may need to include arming men with knowledge about IPV, including

policy. An immediate ban on IPV recognizes the underlying gender power imbalance

within a culture, such as Nigeria, or Nigerian men living in the United States. Advances

in law will protect women in Nigeria (Madu, 2015; Mose, & Gillum, 2015). For example,

the Violence Against Persons Bill passed the Nigeria House of Assembly in 2013 (Madu,

2015), which may serve as a basis for protecting women against violence (Madu, 2015).

Nevertheless, there is currently a lack of clarity and direction in Nigeria's existing

laws concerning IPV (Madu, 2015). Stronger laws and reporting of IPV would have the

most significant effects on the rates of IPV in Nigeria. There is no known national policy

in Nigeria that guides the process of holding perpetrators accountable through

interventions and prosecution, thereby limiting the deterring effects on IPV in the nation (Nnadi, 2015). While the current research focused on the experiences of IPV by Nigerians in New York City, the long term solution to IPV in this community is the policy and legal protections for women in Nigeria. Such protections would alter the social and gender norms that are contributing to such violence. Having laws and legislation preventing IPV in Nigeria would also depend on understanding IPV experienced by the victims, whether women or men and overcoming traditional, religious beliefs and practices in Nigeria (Igwe, 2015).

There is growing evidence that acculturation can prevent IPV (Berry, 1997; Dim, & Edelstein, 2013; Johnsdotter & Essén, 2015). The first prevention approach to IPV should be to stop it before it begins, and according to Decker, Miller, Illangasekare, and Silverman (2013), one of the means of achieving that is through understanding IPV, including through acculturation. This research involved understanding the IPV experiences of 12 Nigerian born men when they lived in Nigeria, and now that they are in the United States. The findings were from the qualitative interviews conducted on the12 Nigerian men living in New York City and findings include (a) emotional aberration, (b) secondhand trauma, (c) Machismo, and (d) Acculturation and understanding of IPV. These findings corroborate other research outcomes on the influence of immigration and acculturation and provided insights into Nigerian men's experiences of IPV while in Nigeria and the United States.

Acculturation and the criminalization policy toward IPV in the United States changed how the Nigerian men in this study viewed IPV. The change in their IPV

perspective illustrates how acculturation and the United States' policy of criminalizing

IPV could be used to enlighten others in the Nigerian community and prevent IPV. In

general, IPV prevention efforts should focus on preventing it before it happens. No one

should have to experience IPV, whether woman or man. Thus, IPV prevention within the

Nigerian community in New York City could focus on enlightening people through

meaningful discussion that helps participants critically examine their beliefs and

behaviors and shifting their perceptions of violence. Active prevention of IPV in the

Nigerian community in New York City would require community dialogue. Through

community dialogue, people can listen, share, and think deeply about building strong

relationships and understanding the implications of perpetrating IPV in the United States.

By listening deeply to other people's stories, one can also understand their own stories

differently.

Participants in this research expressed heightened awareness of IPV, crediting

IPV information dissemination through different media outlets, including social media.

That makes IPV prevention a team effort. Individuals, government (local, state, Federal),

healthcare and community organizations, and social services have parts to play in

preventing IPV (W.H.O./ /LSHTM, 2010). In the United States, the legislative body

crafts and passes health policy, and signed into law by the government's administrative

branch (Miller and Hutton 2004, page 2; Teitelbaum & Wilensky, 2013). The judiciary

interprets the laws (Miller and Hutton 2004, page 2). A health policy can also be made

through an Executive Order by the President or Governor (Teitelbaum & Wilensky,

2013). Public health and healthcare workers implement health policies that make them

responsible for building awareness of IPV by creating and disseminating IPV materials through audio or visual messages on what the policy is all about (Teitelbaum & Wilensky, 2013).

Nine out of the twelve participants in this research credited some measure of the change in their understanding of IPV to the United States IPV laws. Health Policy governs the relationship between individuals and organizations involved in health service delivery and the public (Miller and Hutton 2004; Teitelbaum & Wilensky, 2013). It specifies how individuals and organizations involved in health service delivery act towards patients or health services (Miller and Hutton 2004; Teitelbaum & Wilensky, 2013). Public interests are of uttermost importance to health policy. It also serves as a regulatory and allocative tool in policymakers' hands (Miller and Hutton 2004; Teitelbaum & Wilensky, 2013). The policy sets out standards for people, the healthcare workers, and their agency to hold employees accountable if they utilize the agencies' resources or their position to commit IPV. While requiring all hands-on deck, public health workers have a lot more work to increase IPV awareness in the Nigerian community in New York. Dealing with domestic violence requires professional assistance. However, public health workers need a policy on IPV to guide them while performing their duties.

Besides government healthcare workers and health workers working for private organizations, increasing IPV awareness can be expanded through nongovernmental organizations (NGOs). Expanding the availability of how information on IPV is shared is vital to increase awareness and potential change in the understanding and potential

reduction of IPV among Nigerians living in the New York area. NGOs are organizations that are independent of government involvement, and sometimes non for profit. I have an NGO dedicated to creating awareness of IPV among the Nigerian community in New York. The organization's goal is to create awareness about IPV in the Nigerian community and the nation of Nigeria.

The name of my NGO is "Banner of Love Ministries International Inc." Banner of Love Ministries International Inc.'s vision is to transform the culture of violence in the Nigerian community in New York City by changing the people's understanding of IPV and building the community's capacity to respond to survivors and their families' complex needs. Before now, Banner of Love Ministries International has only held a Bi-Annual Domestic Violence Awareness Month event in a seminar. So far, we have discussed topics that include IPV causes, IPV in the religious community, and why battered people stay. Banner of Love Ministries International Inc. would now include events such as roundtable discussions, workshops, and seminars to create safe spaces where people can name and challenge the dynamics of power and control and explore how they create and sustain nonviolence in the Nigerian community and sociocultural locations. Creativity is realized, and new ways to resist and transform violence emerge, and healing begins. A sense of belonging, of community, is a critical component of the healing process. Healing is necessary for building peace together.

Community Dialogue

Transformative dialogue is critical to IPV prevention efforts. In the dialogue with Nigerians entering the United States new, they will be made aware that life in the United

States is different from what life is in Nigeria, especially when it comes to IPV. They would also be made aware that IPV can be a dangerous or life threatening situation for the victim and others who may try to become involved, including children, communities, and society. That there are laws and policies, including in the workplace, that hold perpetrators accountable and the services available to victims. A dialogue with the Nigerian community in New York should include participants expressing their experience(s) with IPV while living in Nigeria. Freely speaking the truth about their IPV experiences, they could discover inner resources that they never knew they had. By sharing their IPV experiences before coming to the United States, Nigerians living in New York can see how they can hold themselves accountable. The commitment to nonviolence, to the community, to each other and self, is strengthened. That is in alignment with Berry's (2007) suggestion that integration can be an acculturation strategy. Berry's (2007) described the maintenance of group characteristics and contact between groups as fundamental issues that face immigrants and settlement society. The intersection of these issues creates an intercultural space in which both groups develop their cultural boundaries and social relationships (Berry, 2007).

Men's Roundtable

One of the results in this research on the IPV experiences of Nigerian men living in New York City from living in Nigeria and now in the United States, is the change in IPV perception through social interaction. Creating or increasing awareness of the consequences of IPV in the Nigerian community in New York City would require everyone's participation, including men. Otherwise, prevention will be difficult.

According to the participants in this research and others before it, one means of preventing IPV is to increase awareness. The men's round table aims to create a safe and supportive space for men to gather to share, address, and support each other on IPV. It is a space of ongoing dialogue, education, support, and healing and discussion on the struggle to end violence in the Nigerian community in N.Y. Nigerian nation and our world.

Engaging men and boys and family based programs are vital to enhancing the bystander approaches to IPV prevention (Niolon et al. 2017). Men and boys as allies in the prevention of IPV, increase the awareness of IPV and self efficacy of both men and women/boys and girls and intentions to engage in active bystander behavior that can further reduce IPV perpetration and victimization (Niolon et al., 2017). To bring men and boys, as necessary, participants in reducing IPV alongside women and girls will require men and boy's comprehension of the consequences of violence against women and girls (Jewkes, Flood, & Lang, 2015).

The new Nigerian immigrants and those that are already living in New York City are told the benefit of adjusting to the American culture, including the IPV criminalization policy in the United States. It is to help eliminate or minimize situations that could potentially cause serious physical injuries, the loss of life, or loss of freedom. Another responsibility of Banner of Love Ministries International Inc. is to create awareness about IPV also by presenting women in a positive light as opposed to just victims.

A protective environment, such as a modified physical and social atmosphere, neighborhoods, school climate, and safety, can reduce IPV (Niolon et al. 2017). That means Nigerians in New York City would comply with and endure the enforcement of organizational policies/procedures and a nurturing environment. As a result, immigrants must acquire new customs or norms of social behavior, even those who want to retain their cultural traits such as language, dress, or religion. Reduced IPV increases safety and less harm to victims of IPV (Berry, 1997; Decker, Miller, Illangasekare, & Silverman, 2013).

Like most immigrants in the United States and elsewhere globally, most Nigerians migrated to the United States to better their lives (Davis, D'Odorico, Laio, & Ridolfi, 2013). Evidence suggests that poverty, financial stress, and low income can increase IPV risk (Hartmann, Hayes, Clark, 2014). Research has also shown that gender inequality in education, employment, and income is a risk factor for IPV (W.H.O/ /LSHTM, 2010). However, policies and programs aimed at strengthening economic supports for families and equal pay for women have been shown to reduce poverty, financial stress on a potential perpetrator, and economic dependency by the likely victim of IPV (Hartmann, Hayes, Clark, 2014; Niolon et al., 2017). Equality increase in annual earnings for women, women's empowerment, has been shown to decrease conflicts in relationships, and improved relationship satisfaction (Hartmann, Hayes, Clark, 2014). Decrease conflicts in relationships and improved relationship satisfaction have equally been associated with policies and programs that strengthen families' economic support and equal pay for women (C.D.C., 2017). A reduced IPV in the Nigerian community in

New York City can, therefore, be as much as an indication of reduced financial pressure and improvement in a wide range of health outcomes as it can potentially reduce the economic burden on the potential IPV perpetrators in the Nigerian community in New York City (Niolon et al. 2017). Research has also associated the possible increase in improvement in a wide range of health outcomes for individuals, neighborhoods, communities, and states (Niolon et al. 2017). Reducing financial stress could, therefore, decrease the potential for relationship conflict and dissatisfaction (which are strong predictors of IPV) and increase relationship satisfaction and personal wellbeing (Niolon et al., 2017). Improving family financial stability and autonomy reduces the economic dependence of a potential victim on a possible perpetrator and provides alternatives to unhealthy relationships (Niolon et al., 2017). Reduction in the risk for IPV can, therefore, be an indication of efforts that improve financial security for families and women's education, employment, and income, such as exists in countries such as the United States (Hartmann, Hayes, Clark 2014; Niolon et al. 2017).

Conclusion

To stop IPV, people must understand it, including understanding the consequences to those who perpetrate IPV. Understanding is an essential factor in creating knowledge or assimilating information. One can develop understanding through observation, cognition, learning, experience, awareness, insight, or study. Culture helps with how people understand phenomena, such as IPV. IPV can be a learned behavior. Thus, cultural and cognitive factors related to IPV against women is worth exploring,

considering that neighborhoods and the environment influence IPV (Beyer, Wallis & Hamberger, 2013).

The question then becomes, if culture can influence IPV, can another culture help immigrants lean a new and sometimes better way of conflict resolution to reduce IPV frequency to the extent that it will occur doubtfully? From the current research, we can conclude that the ability to understand IPV differently in the United States enlightened 12 Nigerian men in New York City to consider preventing IPV.

The current work featured interviews of 12 Nigerian men in New York City on IPV. The results produced four thematic findings. First, Participants perceived emotional aberration to be a significant cause of IPV. Second, gender norms, Machismo, to play a significant role in perpetuating IPV, especially male violence against females. Third, Participants perceived secondhand trauma to be a factor for IPV, with many participants identifying secondhand trauma from witnessing IPV in Nigeria. Lastly, acculturation can positively influence migrants' understanding of IPV. These findings are consistent with prior research in the area. Future research can utilize the current work findings to understand better IPV factors in Nigerian communities in New York City and the United States more broadly. The implications for social change are to increase IPV awareness within Nigerian communities in New York City, the United States, and the world.

References

Abramsky, T., Devries, K. M., Michau, L., Nakuti, J., Musuya, T., Kiss, L., ...& Watts, C. (2016). Ecological pathways to prevention: How does the SASA! Community mobilization model work to prevent physical intimate partner violence against women? *BioMed Central Public Health*, *16*(1), 1. doi:10.1186/s12889-016-3018-9

Abeya, S. G., Afework, M. F., & Yalew, A. W. (2012). Intimate partner violence against women in West Ethiopia: A qualitative study on attitudes, woman's response, and suggested measures as perceived by community members. *Reproductive Health, 9*(14). doi:10.1186/1742-4755-9-14

Adebayo, A. A. (2014). Domestic violence against men: Balancing the gender issues in Nigeria. *American Journal of Sociological Research, 4,* 14-29. doi: 10.5923/j.sociology.20140401.03

Adogu, P. O. U., Chimah, U. C., Ubajaka, C. F., Ilika, A. L., & Egenti, N. B. (2015). Attitude and perception of intimate partner violence among women in military and civilian communities in Abuja Nigeria. *Advances in Applied Sociology, 5*(6), 195. DOI: 10.4236/aasoci.2015.56019

Agüero C. M. (2013). The need for a phenomenological perspective on caring in the nursing curriculum. *Investigación y Educación en Enfermería, 31*(1), 142-145.

Akanle, O., Adesina, J. O., & Ogbimi, A. O. (2016). Men at work keep-off: Male roles and household chores in Nigeria. *Gender and Behavior*, *14*(3), 7833-7854.

Akinsulure-Smith, A. M., Chu, T., Keatley, E., & Rasmussen, A. (2013). Intimate partner violence among West African immigrants. *Journal of Aggression, Maltreatment, and Trauma, 22*(1):109-129. DOI: 10.1080/10926771.2013.719592

Alves, M. J. V., Manita, C., Caldas, I. M., Fernández-Martinez, E., Gomes da Silva, A., & Magalhães, T. (2016). Evolution and analysis of cultural and cognitive factors related with domestic violence against women. *Journal of Interpersonal Violence,* 34(3):621-641 doi:0886260516645570

Banyard, V. L. (2015). Toward the next generation of bystander prevention of sexual and relationship violence: action coils to engage communities. Springer International Publishing.

Bardi A., Buchanan K. E., Goodwin R., Slabu L., Robinson M. (2014). Value stability and change during self-chosen life transitions: Self-selection versus socialization effects. *Journal of Personality and Social Psychology, 106*, 131-147. doi:10.1037/a0034818

Basile, K. C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S. G., & Raiford, J. L. (2016). STOP SV: a technical package to prevent sexual violence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Bauder, H. (2013). Nation, 'migration' and critical practice. *Area*, *45*(1), 56-62. doi:10.1111/j.1475-4762.2012. 01129.x

Beauchamp, R., Lindsay, S. P., Hunter, L. P., & Talavera, G. (2012). Patriarchal beliefs and attitudes toward intimate partner violence among Spanish-speaking adults.

Hispanic Health Care International, 10(3), 137-145. doi:

http://dx.doi.org/10.1891/1540-4153.10.3.137

Bent-Goodley, T., & Stennis, K. B. (2015). Intimate partner violence within church

communities of African ancestry. In *Religion and Men's Violence Against Women*

(pp. 133-148). New York, NY: Springer.

Berger, R. (2015). Now I see it, now I don't: Researcher's position and reflexivity in

qualitative research. *Qualitative Research*, *15*(2), 219-234.

doi:10.1177/1468794112468475

Berry, J. W. (1997). Immigration, Acculturation, and Adaptation. Applied Psychology:

An International Review, 46, 5-34.

https://doi.org/10.1111/j.1464-0597.1997.tb01087.x

Berry, J. W. (2007). Acculturation strategies and adaptation. In J. E. Lansford, K. Deater-

Deckard, & M. H. Bornstein (Eds.), *Duke series in child development and public*

policy. Immigrant families in contemporary society (p. 69–82). Guilford Press.

Beyer, K., Wallis, A. B., &Hamberger, L. K. (2013). Neighborhood environment and

intimate partner violence: A systematic review. *Trauma, Violence, and Abuse,*

1524838013515758. doi:10.1177/1524838013515758

Bourgeault, I., Dingwall, R. and de Vries, R. (2013). *The SAGE handbook of qualitative*

methods in health. Thousand Oaks, CA: SAGE Publications.

Breiding, M. J., Chen J., & Black, M. C. (2014). Intimate partner violence in the United

States — 2010. Atlanta, GA: National Center for Injury Prevention and Control,

Centers for Disease Control and Prevention.

Budgeon, S. (2013). The dynamics of gender hegemony: Femininities, masculinities and

    social change. *Sociology*, 48: 317 doi:10.1177/0038038513490358

Carbó, P. A., Ahumada, M. A. V., Caballero, A. D., & Argüelles, G. A. L. (2016). "How

    do I do discourse analysis?" Teaching discourse analysis to novice researchers

    through a study of intimate partner gender violence among migrant

    women. *Qualitative Social Work*, *15*(3), 363-379. doi:

    https://doi.org/10.1177/1473325015617233

Centers for Disease Control and Prevention (2014). Proposed data collections submitted

    for public comment and recommendations. Federal Register /Vol. 79, No. 75 /

    Friday, April 18, 2014 / Notices.

https://www.federalregister.gov/documents/2014/04/18/2014-08784/proposed-data-

    collections-submitted-for-public-comment-and-recommendations

Centers for Disease Control and Prevention (2015). *The DELTA FOCUS program:*

    Intimate partner violence is preventable. Retrieved from:

    http://www.cdc.gov/violenceprevention/deltafocus/index.html

Central Intelligence Agency. (2017). The World Factbook. Nigeria. Retrieved February

    5, 2015, from: https://www.cia.gov

Central Intelligence Agency. (2016). *The world factbook*. Retrieved September 19, 2016,

    from: https://www.cia.gov/library/publications/the-world-factbook/index.html

Chan, Z. C., Fung, Y. L., &Chien, W. T. (2013). Bracketing in phenomenology: only

    undertaken in the data collection and analysis process? *The Qualitative*

    Report, *18*(30), 1-9. Retrieved from https://nsuworks.nova.edu/tqr/vol18/iss30/1

Cho, H. (2012). Racial differences in the prevalence of intimate partner violence against women and associated factors. *Journal of Interpersonal Violence*, *27*(2), 344-363. doi: 10.1177/0886260511416469

Cilesiz, S. (2011). A phenomenological approach to experiences with technology: Current state, promise, and future directions for research. Educational Technology Research and Development, 59(4), 487-510. doi: https://doi.org/10.1007/s11423-010-9173-2

Cissner, A. B., Labriola, M. and Rempel, M. (2013). Testing the Effects of New York's Domestic Violence Courts: A Statewide Effect Evaluation. *Center for court innovation.* Retrieved from https://www.ncjrs.gov/pdffiles1/nij/grants/242583.pdf

Coker, A. L., Bush, H. M., Cook-Craig, P. G., DeGue, S. A., Clear, E. R., Brancato, C. J., Fisher, B. S., & Recktenwald, E. A. (2017). RCT testing bystander effectiveness to reduce violence. *American Journal of Preventive Medicine (e-pub ahead of print*, DOI: http://dx.doi.org/10.1016/j.amepre.2017.01.020)

Creswell, J.W. (2013). *Qualitative Inquiry and Research Design: Choosing Among Five Approaches.* Sage Publications Inc. South Oaks, CA.

Creswell, J.W. (2014). *Research Design: Qualitative, quantitative and mixed methods approaches.* Sage Publications Inc. South Oaks, CA.

David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N. & Hall, J. E. (2016). A comprehensive technical package for the prevention of youth violence and associated risk behaviors. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Davis, K. F., D'Odorico, P., Laio, F., & Ridolfi, L. (2013). Global spatio-temporal

   patterns in human migration: a complex network perspective. *PLoS One*, *8*(1),

   e53723.doi.org/10.1371/journal.pone.0053723

Decker, M.R., Miller, E., Illangasekare, S., & Silverman, J.G. (2013). Understanding

   gender-based violence perpetration to create a safer future for women and girls.

   The Lancet Global Health, 1(4) 170-e171. doi: 10.1016/S2214-109X (13)70085-8

De Gialdino, I. V. (2009). Ontological and Epistemological Foundations of Qualitative

   Research. *Forum: Qualitative Social Research, 10,* (2), 30. Retrieved from

http://www.qualitative-research.net/index.php/fqs/article/view/1299/3163

Denen, G. M., Asaju, K., & Bott, H. (2014).Gender and urbanization in Nigeria.

   Mediterranean Journal of Social Sciences, 5(26), 33. doi:

   10.5901/mjss.2014.v5n26p33

DeShong, H. A. (2013). Feminist Reflexive Interviewing: Researching Violence against

   Women in St. Vincent and the Grenadines. *Caribbean Review of Gender*

   Studies, *7*, 1-24. Retrieved from:

   https://www.researchgate.net/publication/281493006_Feminist_Reflexive_Intervi

   ewing_Researching_Violence_Against_Women_in_St_Vincent_and_the_Grenadi

   ens

Dillon, G., Hussain, R., Loxton, D., & Rahman, S. (2013). Mental and physical health

   and intimate partner violence against women: A review of the literature.

International journal of family medicine, 2013.

http://dx.doi.org/10.1155/2013/313909

Dim, E. E. &Ogunye, O. (2017): Perpetration and Experience of Intimate Partner

Violence Among Residents in Bariga Local Community Development Area,

Lagos State, Nigeria. *Journal of Interpersonal Violence*

https://doi.org/10.1177/0886260517737555

Donohoe, M. (2014). Individual and societal forms of violence against women in the US

and the developing world: an overview. *Current Women's Health Reports, 2*, 313-

319. Retrieved from:

https://www.researchgate.net/publication/11174492_Individual_and_societal_for

ms_of_violence_against_women_in_the_US_and_the_developing_world_an_ove

rview

Edelstein, A. (2013). Culture transition, acculturation, and intimate partner homicide.

Springer Plus, 2(1), 338. doi: 10.1186/2193-1801-2-338

Englander, M. (2012). The interview: Data collection in descriptive phenomenological

human scientific research. *Journal of Phenomenological Psychology, 43*, 13-35.

DOI: https://doi.org/10.1163/156916212X632943

Fanslow, J. L., Gulliver, P., Dixon, R., & Ayallo, I. (2015). Hitting Back: Women's Use

of Physical Violence Against Violent Male Partners, in the Context of a Violent

Episode. *Journal of interpersonal violence, 30*(17), 2963-2979.DOI:

10.1177/0886260514555010

Farina, G. (2014). Some reflections on the phenomenological method. *Dialogues in*

   Philosophy, Mental and Neuro Sciences, 7(2):50-62.

http://www.crossingdialogues.com/Ms-A14-07.htm

Flew, T., & Waisbord, S. (2015). The ongoing significance of national media systems in

   the context of media globalization. *Media, Culture & Society*,*37*(4), 620-636.

   DOI:10.1177/0163443714566903

Foshee, V. A., Reyes, L. M., Agnew-Brune, C. B., Simon, T. R., Vagi, K. J., Lee, R. D.,

   & Suchindran, C. (2014). The effects of the evidence-based Safe Dates dating

   abuse prevention program on other youth violence outcomes. Prevention Science,

   15(6), 907-916.

Frenkel, O. (2008). A phenomenology of the 'placebo effect': Taking meaning from the

   mind to the body. *Journal of Medicine and Philosophy, 33*(1), 58-79. Retrieved

   from https://doi.org/10.1093/jmp/jhm005

Fulu, E., Jewkes, R., Roselli, T., & Garcia-Moreno, C. (2013). Prevalence of and factors

   associated with male perpetration of intimate partner violence: Findings from the

   UN multi-country cross-sectional study on men and violence in Asia and the

   Pacific. *The Lancet Global Health,* 1(4), e187-e207.DOI: 10.1016/S2214-109X

   (13)70074-3

Fusch, P. I. and Ness, L. R. (2015). Are We There Yet? Data Saturation in Qualitative

   Research. *The Qualitative Report, 20,* (9), 1, 1408-1416.

   https://doi.org/10.1080/08874417.2015.11645799

Gambino, C. P., Trevelyan, E. N., & Fitzwater, J. T. (2014, October). The foreign-born

population from Africa: 2008-2012: American community survey briefs.

Washington, DC: United States Census Bureau. Retrieved from

https://www.census.gov/content/dam/Census/library/publications/2014/acs/acsbr1

2-16.pdf

Glick, P., Wilkerson, M., & Cuffe, M. (2015). Masculine Identity, Ambivalent Sexism,

and Attitudes Toward Gender Subtypes. *Social Psychology*.

 DOI: http://dx.doi.org/10.1027/1864-9335/a000228

Green, J. and Thorogood, N. 92014). *Qualitative methods for health research.* SAGE

Publication Inc. Los Angeles, CA

Hamberger, L.K. & Larsen, S.E. (2015). Men's and Women's Experience of Intimate

Partner Violence: A Review of Ten Years of Comparative Studies in Clinical

Samples: Part I. *Journal of Family Violence,* 30:699–717. DOI 10.1007/s10896-

015-9732-8

Hanna, C. (2014). The Violence Against Women Act and its Effect on the US Supreme

Court and International Law: A Story of Vindication, Loss, and a New Human

Rights Paradigm. *Duq. L. Rev.*, *52*, 415.

Hartmann, H., Hayes, J., & Clark J. (2014). How equal pay for working women would

reduce poverty and grow the American economy. Washington, D.C.: Institute for

Women's Policy Research, Briefing paper (IWPR #C411). Retrieved June 5, 2020

from:

http://www.iwpr.org/publications/pubs/how-equal-pay-for-working-women-

   wouldreduce-poverty-and-grow-the-american-economy

Horn, R. Puffer, E. S. Roesch, E. and Lehmann, H. (2014). Women's perceptions of

   effects of war on intimate partner violence and gender roles in two post-conflict

   West African Countries: consequences and unexpected opportunities. *Conflict*

   and Health 8 N/A. https://doi.org/10.1186/1752-1505-8-12

Htun, M., & Weldon, S. L. (2012). The civic origins of progressive policy change:

   Combating violence against women in global perspective, 1975–2005. *American*

   Political Science Review, 106(03), 548-569.DOI: 10.1017/S0003055412000226

Human Rights Watch US. (2013). Violence against women act renewed. Available at:

   www.hrw.org/news/2013/02/28/us-violence-against-women-act-renewed.

   Accessed July 21, 2015.

Husserl, E. (1970). *The crisis of European sciences and transcendental phenomenology:*

   An introduction to phenomenological philosophy. Evanston, IL: Northwestern

   University Press.

Igwe, B. O. (2015). Overcoming Cultural, Traditional and Religious Beliefs and Practices

   in Understanding and Combating Domestic Violence in Nigeria. *International*

   Journal of Innovative Research and Development,*4*(13).

Jackobsson, A., Von-Borgstede, C., Krantz, G. and Spak, F. (2013). Possibilities and

   Hindrances for Prevention of Intimate Partner Violence: Perceptions among

   Professionals and Decision Makers in Swedish Medium-Sized Town.

International Journal of Behavioral Medicine 20:337-343. DOI: 10.1007/s12529-012-9238-1

Jamjoom, M. I. (2010). Female Islamic studies teachers in Saudi Arabia: A phenomenological study. *Teaching and Teacher Education, 26*(3), 547-558. Retrieved from https://doi.org/10.1016/j.tate.2009.06.019

Jewkes, R., Flood, M., & Lang, J. (2015). From work with men and boys to changes of social norms and reduction of inequities in gender relations: a conceptual shift in prevention of violence against women and girls. *The Lancet, 385*(9977), 1580-1589. DOI:https://doi.org/10.1016/S0140-6736(14)61683-4

Johnsdotter, S. and Essén, B. (2015). Cultural change after migration: Circumcision of girls in Western migrant communities. *Best Practice and Research Clinical Obstetrics & Gynecology,* 32: 13-25. DOI: 10.1016/j.bpobgyn.2015.10.012.

Kalunta-Crompton, A. (2013). Intimate Partner Violence among immigrant Nigerian women in the United States: An analysis of internet commentaries on the murders of nine Nigerian women by their male spouses. *International Journal of Law, Crime and Justice, 41,* (3), 213-232. DOI: 10.1016/j.ijlc.2013.06.002

Kastanakis, M. N., & Voyer, B. G. (2014). The effect of culture on perception and cognition: A conceptual framework. *Journal of Business Research, 67*(4), 425-433. DOI: 10.1016/j.jbusres.2013.03.028

Khan, M. (2014). What is Enlightenment? An Islamic Perspective. *Journal of Religion and Society,* 16. Retrieved from: http://moses.creighton.edu/jrs/2014/2014-34.pdf

Kimber, M., Henriksen, C.A., Davidov, D.M., Goldstein, A.L, Pitre, N.Y., Tonmyr, L., Afifi, T.O. The association between immigrant generational status, child maltreatment history and intimate partner violence (IPV): evidence from a nationally representative survey. *Social Psychiatry Psychiatric Epidemiology, 50(7)*: 1135–1144. DOI: 10.1007/s00127-014-1002-1

Kim, C., & Sung, H. E. (2015). The effects of acculturation on intimate partner violence among Chinese immigrants in New York City. *Journal of Family Violence*, 1-12. DOI: https://doi.org/10.1007/s10896-015-9761-3

Lansford, J. E., Deater-Deckard, K., Bornstein, M. H., Putnick, D. L., & Bradley, R. H. (2014). Attitudes justifying domestic violence predict endorsement of corporal punishment and physical and psychological aggression towards children: A study in 25 low- and middle-income countries. *The Journal of Pediatrics, 164*(5), 1208-1213. DOI: 10.1016/j.jpeds.2013.11.060

Li, Y., Marshall, C. M., Rees, H. C., Nunez, A., Ezeanolue, E. E., & Ehiri, J. E. (2014). Intimate partner violence and HIV infection among women: a systematic review and meta-analysis. *Journal of the international AIDS society*, *17*(1). https://doi.org/10.7448/IAS.17.1.18845

Linos, N., Slopen, N., Subramanian, S. V., Berkman, L., & Kawachi, I. (2013). Influence of community social norms on spousal violence: A population-based multilevel study of Nigerian women. *American Journal of Public Health*, *103*(1), 148-155. DOI: 10.2105/AJPH.2012.300829

Lövestad S., & Krantz, G. (2012). Men's and women's exposure and perpetration of

    partner violence: An epidemiological study from Sweden. *BMC Public Health,*

    *12,*945. DOI:10.1186/1471-2458-12-945

Madu, J. C. (2015). Domestic violence legislation for development, peace, and security in

    Nigeria. *African Security Review*, *24*(3), 279-290.

    DOI:10.1080/10246029.2015.1070274

Makama, G. A. (2013). Patriarchy and gender inequality in Nigeria: The way forward.

    European Scientific Journal, 9(17), 1857-7881, (Print) e 1857-

    7431. DOI: https://doi.org/10.19044/esj.2013.v9n17p%25p

Matamonasa-Bennett, A. (2015). "A disease of the Outside People" Native American

    men's perceptions of intimate partner violence. *Psychology of Women Quarterly,*

    39(1), 20-36. DOI: 10.1177/0361684314543783.

Maxwell, J. (2013). *Qualitative research design: An interactive approach* (3rd Edition).

    SAGE Publication Inc. Los Angeles, CA.

McKenzie, J., Pinger, R.R. & Kotecki, J.E. (2005). *An introduction to community health*

    (Fifth Edition). Jones and Bartlett. Sudbury, MA.

Migration Policy Institute (2015). Nigerian Diaspora in the United States. Retrieved from

    file: ///C:/Users/chinemci/Downloads/RAD-Nigeria.pdf

Miles, M.B. and Huberman, A. M. (1994). *Qualitative data analysis: A methods*

    sourcebook. Thousand Oaks, CA: SAGE.

Miller, R. D. & Hutton R.C. (2004). *Problems in Health Care Law* (*Eight Edition*) Jones

    and Bartlett. Sudbury, MA.

Modi, M. N., Palmer, S., & Armstrong, A. (2014). The role of Violence Against Women Act in addressing intimate partner violence: A public health issue. Journal of Women's Health, 23(3), 253-259. DOI: 10.1089/jwh.2013.4387.

Morrison, Z.J., Gregory, D. and Thibodeau, S. (2012). "Thanks for Using Me": An Exploration of Exit Strategy in Qualitative Research. *International Journal of Qualitative Methods: ARCHIVE, 11* (4). https://doi.org/10.1177/160940691201100408

Mose, G. B., & Gillum, T. L. (2015). Intimate partner violence in African immigrant communities in the United States: Reflections from the IDVAAC African Women's round table on domestic violence. *Journal of Aggression, Maltreatment and Trauma,* 1-13. DOI:10.1080/10926771.2015.1081660

Moustakas, C. (1994). *Phenomenological research methods.* Thousand Oaks, CA: Sage.

Moustakas, C. (2016). *Phenomenological research methods*. SAGE Publications Inc.Thousand Oaks, CA

Moynihan, M. M., Banyard, V. L., Cares, A. C., Potter, S. J., Williams, L. M., & Stapleton, J. G. (2015). Encouraging responses in sexual and relationship violence prevention what program effects remain 1 year later? *Journal of Interpersonal Violence, 30*(1), 110-132.

National Coalition Against Domestic Violence (2017). *Domestic Violence in New York.* Retrieved February 19, 2018, from: https://www.speakcdn.com/assets/2497/new_york.pdf

National Population Commission (NPC) and ICF International (2014). Nigeria

    Demographic and Health Survey (NDHS) 2013. Abuja, Nigeria, and Rockville,

    Maryland, USA: NPC and ICF International.

Nava, A., McFarlane, J., Gilroy, H., & Maddoux, J. (2014). Acculturation and associated

    effects on abused immigrant women's safety and mental functioning: Results of

    entry data for a 7-year prospective study. *Journal of immigrant and minority*

    health, *16*(6), 1077-1084. DOI: 10.1007/s10903.013.9816.6

New York State Unified Courts System (2015). *New York Domestic Violence Laws.*

    Retrieved from https://www.nycourts.gov/TOPICS/domesticviolence.shtml

Nandi, 1. (2012). An Insight into Violence against Women as Human Rights Violation in

    Nigeria: A Critique. *Journal of Politics and Law, (5)* 3. DOI:10.5539/jpl.v5n3p48

Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L.

    (2017). Preventing Intimate Partner Violence Across the Lifespan: A Technical

    Package of Programs, Policies, and Practices. Atlanta, GA: National Center for

    Injury Prevention and Control, Centers for Disease Control and Prevention.

O'Brien, J. E., & Macy, R. J. (2016). Culturally specific interventions for female

    survivors of gender-based violence. *Aggression and violent behavior*,31, 48-60

Office of Legislative Research (2016). Voisine v. United States, 136 S. Ct. 2272. (2016-

    R0238). Retrieved June 5, 2020 from: https://www.cga.ct.gov/2016/rpt/pdf/2016-

    R-0238.pdf.

Ogunsiji, O., Wilkes, L., Jackson, D., & Peters, K. (2012). Suffering and smiling: West African immigrant women's experience of intimate partner violence. Journal of Clinical Nursing, 21, 1659–1665. doi:10.1111/j.1365-2702.2011.03947.x

Onigbogi, M. O., Odeyemi, K. A. and Onigbogi, O. O. (2015). Prevalence and Factors Associated with Intimate Partner Violence among Married Women in an Urban Community in Lagos State, Nigeria. *African Journal of Reproductive Health, 19*(1): 91: 100.

Ortega, F., &Peri, G. (2013).The effect of income and immigration policies on international migration. *Migration Studies*, *1*(1), 47-74. doi: 10.1093/migration/mns004

Ozer, S., & Schwartz, S. J. (2016). Measuring globalization-based acculturation in Ladakh: Investigating possible advantages of a tridimensional acculturation scale. *International Journal of Intercultural Relations, 53,* 1-15. https://doi.org/10.1016/j.ijintrel.2016.05.002

Patton, M. Q. (2002). *Qualitative Research & Evaluation Methods: Integrating Theory and Practice* (3rdEdition). SAGE Publications, Inc. Thousand Oaks: CA.

Patton, M. Q. (2014). *Qualitative Research & Evaluation Methods: Integrating Theory and Practice* (4th Edition). SAGE Publications, Inc. Thousand Oaks: CA.

Paul, L. A. (2015). Precis of transformative experience. *Philosophy and Phenomenological Research, 41*(3), 760-765. doi: 10.1111/phpr.12249

Paulson, D.L. (2013). Vancouver Index of Acculturation (VIA). Measurement Instrument Database for Social Sciences. Retrieved from: www.midss.org/sites/default/files/via.american.pdf

Pettigrew, R. (2015). Transformative experience and decision theory. *Philosophy and Phenomenological Research, 41*(3), 766-774. https://doi.org/10.1111/phpr.12240

Pereira, A. R., Vieira, D. N., & Magalhães, T. (2013). Fatal intimate partner violence against women in Portugal: A forensic medical national study. *Journal of forensic and legal medicine*, *20*(8), 1099-1107. https://doi.org/10.1016/j.jflm.2013.09.015

Pew Research (2013). *Chapter 2: Equal Treatment for Men and Women.* Retrieved from http://www.pewsocialtrends.org/2013/12/11/chapter-2-equal-treatment-for-men-and-women/

Pew Research (2015). *Raising Kids and Running a Household: How Working Parents Share the Load.* Retrieved from http://www.pewsocialtrends.org/2015/11/04/raising-kids-and-running-a-household-how-working-parents-share-the-load/

Pierotti, R. S. (2013). Increasing rejection of intimate partner violence evidence of global cultural diffusion. *American Sociological Review*, 78(2), 240-265. https://doi.org/10.1177/0003122413480363

Pinchevsky, G. M., & Wright, E. M. (2012).The effect of neighborhoods on intimate partner violence and victimization. *Trauma, Violence, and Abuse*, *13*(2), 112-132. doi: 10:1177/1524838012445641

Pozgar, G.D. (2013). *Legal and ethical issues for health professionals* (third edition)

    Jones and Bartlett Learning: Burlington, MA.

Prieto, L., Sagafi-nejad, T. and Janamanchi, B. (2013). A Bourdieusian Perspective on

    Acculturation: Mexican Immigrants in the United States. *Journal of*

    Administrative Sciences 3(4), 290-305. doi: 10.3390/admsci3040290

Ramos, B. M. (2013). Intimate partner violence among Puerto Rican women: Does

    acculturation mediate the effect of psychological abuse on mental health. In *141st*

    APHA Annual Meeting (November 2-November 6, 2013). APHA.

Ramsay, J., Rutterford, C., Gregory, A., Dunne, D., Eldridge, S., Sharp, D., &Feder, G.

    (2012). Domestic violence: knowledge, attitudes, and clinical practice of selected

    UK primary healthcare clinicians. British Journal General Pract,62(602), e647-

    e655. doi: 10.3399/bjgp12X654623

Rudestam, K. E. and Newton, R.R. (2015). *Surviving your dissertation: A comprehensive*

    guide to content and process (4th Edition). SAGE Publication Inc. Los Angeles,

    CA.

Rudnev, M. (2014). Value Adaptation among Intra-European Migrants: Role of Country

    of Birth and Country of Residence. Journal *of cross-cultural psychology, 45* (10)

    1626-1642.doi: 10.1177/0022022114548482

Sabina, C., Cuevas, C. A., & Schally, J. L. (2013). The effect of immigration and

    acculturation on victimization among a national sample of Latino women.

    Cultural Diversity and Ethnic Minority Psychology, 19(1), 13.

    doi: 10.1037/a0030500

Saldaña, J. (2016). *The Coding Manual for Qualitative Researchers* (Third Edition). SAGE Publications, Inc. Thousand Oaks: CA.

Sargeant, J. (2012). Qualitative research part II: participants, analysis, and quality assurance. *Journal of graduate medical education*, *4*(1), 1-3.doi:http://dx.doi.org/10.4300/JGME-D-11-00307.1

Shosha, G.A. (n. d). Employment of Colaizzi's strategy in descriptive phenomenology: A reflection of a researcher. *European Scientific Journal, 8* (27), 1857- 7431. doi: https://doi.org/10.19044/esj.2012.v8n27p%25p

Sidanius, J., Kteily, N., Levin, S., Pratto, F., & Obaidi, M. (2016). Support for asymmetric violence among Arab populations: The clash of cultures, social identity, or counter dominance? *Group Processes & Intergroup Relations,* 19(3), 343-359. doi: 10.1177/1368430215577224

Smith, S. G., Chen, J., Basile, K. C., Gilbert, L. K., Merrick, M. T., Patel, N., Walling, M., & Jain, A. (2017). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010-2012 State Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Spiegelberg, H. (1982). *The phenomenological movement: A historical introduction*. The Hague, Netherlands: Martinus Nijhoff Publishers.

Stevens, M. (2013). *Ethical issues in qualitative research.* Social care workforce research unit: Kings College London.

The Community Toolbox (2016). *Section 14. MAP-IT: A Model for Implementing Healthy People 2020.* Retrieved from

http://ctb.ku.edu/en/table-of-contents/duringview/models-for-community-health-and-

 development/map-it/main#mobilize

The National Institutes of Health (NIH) Office of Extramural Research (2012). *Human*

 Subjects Protections Training. Retrieved from:

 https://humansubjects.nih.gov/resources

Teitelbaum, J.B. & Wilensky, S.E (2013). Essentials of Health Policy and Law (Second

 Edition). Jones &Bartlett. Burlington, MA.

Twenge, J. M., Sherman, R. A., and Wells, B. E. (2015) Changes in American Adults'

 Sexual Behavior and Attitudes, 1972–2012 (2015). *Archives of Sexual Behavior*

 doi:10.1007/s10508-015-0540-2

United Nations (2010). Handbook for Legislation on Violence Against Women. United

 Nations: NY. Retrieved from

 http://www.un.org/womenwatch/daw/vaw/handbook/Handbook%20for%20legisla

 tion%20on%20violence%20against%20women.pdf

United States Department of Health and Human Services Office for Human Research

 Protections (2017). *Withdrawal of Subjects from Research Guidance (2010).*

 Retrieved from:

 https://www.fda.gov/downloads/regulatoryinforamtion/guidances/ucm126489.pdf

Vagi, K. J., Olsen, E. O., Basile, K. C., & Vivolo-Kantor, A. M. (2015). Teen dating

 violence (physical and sexual) among U.S. high school students: findings from

 the 2013 national youth risk behavior survey. JAMA Pediatrics, 169(5), 474-482.

Vandello, J. A., & Bosson, J. K. (2013). Hard-won and easily lost: A review and synthesis of theory and research on precarious manhood. Psychology of Men & Masculinity, 14(2), 101–113. https://doi.org/10.1037/a0029826

Walton-Roberts, M. (2015). International migration of health professionals and the marketization and privatization of health education in India: From push–pull to global political economy. *Social Science & Medicine*, *124*, 374-382doi: 10.1177/0163443714566903

Waltermaurer, E. (2012). Public justification of intimate partner violence: A review of the literature. Trauma, Violence, & Abuse, 13(3), 167-175.doi: 10.1177/1524838012447699

Waycott, J., Morgans, A., Pedell, S., Ozanne, E., Vetere, F., Kulik, L., & Davis, H. (2015). Ethics in evaluating a sociotechnical intervention with socially isolated older adults. *Qualitative health research*, *25*(11), 1518-1528. https://doi.org/10.1177/1049732315570136

Weldon, S. L., & Htun, M. (2013). Feminist mobilization and progressive policy change: why governments take action to combat violence against women. *Gender and Development* 21:2, 231-247. https://doi.org/10.1080/13552074.2013.802158

West, C. M. (2016). African immigrant women and intimate partner violence: A systematic review. *Journal of Aggression, Maltreatment & Trauma*, *25*(1), 4-17. doi: 10.1080/10926771.2016.1116479

World Health Organization/London School of Hygiene and Tropical Medicine (2010).

Preventing intimate partner and sexual violence against women: taking action and

generating evidence. Geneva, World Health Organization.

World Health Organization. (2017). Violence against women: Intimate partner and sexual

violence against women. Retrieved from

http://www.who.int/mediacentre/factsheets/fs239/en/

World Health Organization (n. d), Intimate Partner Violence and Alcohol Fact Sheet.

Retrieved from

http://www.who.int/violence_injury_prevention/violence/world_report/factsheets/ft_inti

mate.pdf

Wright, E. M., & Benson, M. L. (2010). Immigration and intimate partner violence:

Exploring the immigrant paradox. *Social Problems, 57*(3), 480-503.

https://doi.org/10.1525/sp.2010.57.3.480

Yamawaki, N., Ochoa-Shipp, M., Pulsipher, C., Harlos, A., & Swindler, S. (2012).

Perceptions of domestic violence the effects of domestic violence myths, victim's

relationship with her abuser, and the decision to return to her abuser. *Journal of

Interpersonal Violence*, *27*(16), 3195-3212.

https://doi.org/10.1177/0886260512441253

Yoshihama, M., & Tolman, R. M. (2015). Using Interactive Theater to Create

Socioculturally Relevant Community-Based Intimate Partner Violence

Prevention. *American journal of community psychology, 55*(1-2), 136-147.

doi:10.1007/s10464-014-9700-0.

Yilmaz, K. (2013). Comparison of Quantitative and Qualitative Research Traditions: epistemological, theoretical, and methodological differences.*European Journal of Education*, *48*(2), 311-325. doi: 10.1111/ejed.12014

Yüksel, P. and Yıldırım, S. (2015). Theoretical frameworks, methods, and procedures for conducting phenomenological studies in educational settings. *Turkish Online Journal of Qualitative Inquiry, 6*(1), 1-20. doi:10.17569/tojqi.59813164

Appendix A: Interview Guide

Introduction:

Thank you for being here. I need your consent before we can proceed with the interview. I am a Nigerian woman who is presently researching experiences of intimate partner violence among Nigerian born men living in New York. This research is for my dissertation in a PhD program at Walden University.

Intimate partner violence, also known as domestic violence, is a pattern of behavior in which a partner assaults, threatens, deprives, and intimidates the other to gain control of her or him. Domestic violence effects people of all ages, cultures, religion, social class, ethnic groups, and gender.

Today, I will ask you a few questions about intimate partner violence. I ask that you base your response not only on your experiences, but also your thoughts, feelings and understanding. Ask me questions or ask for clarifications if the questions are unclear. I just would like to remind you to refrain from using names of anyone you know to have been in an abusive relationship. Okay, I will now start the recording and we will begin.

1. Could you tell me what you understand by the term "intimate partner violence"?
While in Nigeria:
2. Can you tell me about your beliefs with regards to intimate partner while you were in Nigeria?

3. Did you think then intimate partner violence was a problem within your local community? If yes, how was it a problem?

4. What situations did you consider as partner violence while in Nigeria? Probe: What actions against whom made you consider that as IPV? Who was involved? Husband, wife, children, extended family, neighbors, etc.

   Probe for immediate causes, as well as for wider social structural and sociocultural causes.

   If physical, mental, or reproductive health problems are mentioned, probe for examples of health states and how they are related to domestic violence occurrence.

5. What do you believe caused intimate partner violence within your community or other communities in Nigeria?

6. What effect did you witness on the individual family members of the victim of IPV in Nigeria?

7. What effect did partner violence have for the community at large in Nigeria?

   Probe: Health, Economic, Social

8. To whom did a victim of abuse turn to when in need of help because of IPV while in Nigeria?

9. How did the community treat the perpetrator in Nigeria?

10. How do you feel knowing that men use violence to control women with whom they are in a relationship more than women do? Probe: How does that make you feel about female victims?

    In US: Reflective of any Potential Perception Change:

11. What is your perception about IPV since arriving in the USE U.S. ASA ADJECTIVE AND UNITED STATES AS A NOUN? Is that a change from what you know about IPV when you were in Nigeria? Probe: What influenced this opinion or change? The criminalization policy for intimate partner violence in the United States? Education? Exchange of Nigerian culture for America's?

12. What's your view on the criminalization policy for intimate partner violence in the US? Probe: do you think it helps or hurts the prevention efforts of IPV in our community here in New York City?

13. How can intimate partner violence be prevented within the Nigerian community in NY?

14. Given the discussion that we just had, what relevant information needs adding to it?

      Conclusion: We have concluded the interview portion of our session today. Is there anything else that you would like to add to your interview? Thank you for your participation in the interview. I will return to you to verify that the answered I transcribed matched what you said in this interview. I will now stop recording.

Appendix B: Flyer

HELP CREATE POSITIVE CHANGE BY PARTICIPATING IN A STUDY!

My name is Christiana I. Chineme, and I am a doctoral candidate at Walden University! I am conducting research on Nigerian born men's experiences regarding intimate partner violence (IPV) in Nigeria and New York . The criteria to participate in this study are:

- A male born in Nigeria

-Between 30-60 years' old

-living in New York and acculturated to the USE U.S. ASA ADJECTIVE AND UNITED STATES AS A NOUN

-have witnessed/experienced a woman being a victim of IPV in Nigeria and/or the USE U.S. ASA ADJECTIVE AND UNITED STATES AS A NOUN

-Speak, write and understand English

Here is an opportunity for you to share your knowledge, and experience

Contact me at the phone number or email below if you are interested in participating in my study.

Sincerely,

Christiana I. Chineme

Walden University

Contact Information

Phone: xxx-xxx-xxxx

Email:

Appendix C: Demographic Questionnaire

Instructions: Please provide a response for each of the following questions:

1. **How old are you? (30 - 60 years) ---**

2. **How long have you been married?**
   o 5-7 years
   o 7-10 years
   o 11-15 years
   o 15 years and above

3. **Which number of marriage is this for you?**

   o 1
   o 2
   o 3 or more

4 **What is the highest level of education you completed?**
   o Elementary school only
   o Some high school, but did not finish
   o Completed high school
   o Some college but did not finish
   o Two-year college degree /AA / A.S.
   o Four-year college degree / B.A. / B.S.
   o Some graduate work
   o Completed Masters or professional degree
   o Advanced Graduate work or Ph.D.

5 **How long have you been living in New York?**

   _____

Appendix D: Vancouver Index of Acculturation (VIA)

Please circle one of the numbers to the right of each question to indicate your degree of agreement or disagreement. Many of these questions will refer to your heritage (Nigerian) culture. That would help me score your level of acculturation in the United States. Your heritage culture (other than American) is: Nigeria.

		Disagree					Agree			
1.	I often participate in my heritage cultural traditions									
2.	I often participate in mainstream American cultural traditions									
3	I would be willing to marry a person from *my heritage* culture.									
4	I would be willing to marry a white American person.									
5	I enjoy social activities with people from the same heritage culture as myself.									
6	I enjoy social activities with typical American people.									
7	I often participate in my heritage cultural traditions									
8	I often participate in mainstream American cultural traditions									
9	I would be willing to marry a person from *my heritage* culture.									
10	I would be willing to marry a white American person.									
11	I enjoy social activities with people from the same heritage culture as myself.									
12	I often behave in ways that are typically American.									
13	It is important for me to maintain or develop the practices of my heritage culture									
14	It is important for me to maintain or develop American cultural practices.									
15	I believe in the values of my heritage culture.									
16	I believe in mainstream American values									
17	I enjoy the jokes and humor of my heritage culture									
18	I enjoy white American jokes and humor.									
19	I am interested in having friends from my heritage culture.									
20	I am interested in having white American friends.									